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# *The Australasian Journal of Pharmacy*

REGISTERED AT THE G.P.O., MELBOURNE, FOR TRANSMISSION BY POST AS A NEWSPAPER

THE OFFICIAL FEDERAL JOURNAL of the ASSOCIATED PHARMACEUTICAL ORGANISATIONS of AUSTRALIA

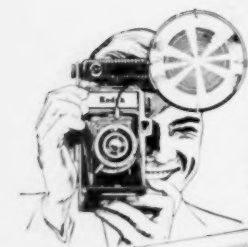
OFFICIAL JOURNAL OF THE PHARMACEUTICAL SOCIETY OF NEW ZEALAND

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June 30, 1955

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## OFFICIAL ANNOUNCEMENTS

### PHARMACY BOARD OF VICTORIA

#### EXAMINATION COMMENCING DATES 1955.

Preliminary Examination.—November 16.

Intermediate Examination.—November 7.

Final Examination.—August 29; November 15.

Entries for the Preliminary and Intermediate Examinations close fourteen days, and for the Final Examination twenty-one days, before the date of commencement of the Examination.

Full details obtainable from the office of the Board.

F. C. KENT, Registrar.

360 Swanston Street,  
Melbourne.

### PHARMACY BOARD OF NEW SOUTH WALES

#### PHARMACY QUALIFYING EXAMINATION

The next Qualifying Examination will commence at the University of Sydney on Thursday, July 28, 1955.

#### Time Table

Pharmaceutics I . . . . Thursday, July 28, Morning.  
Pharmaceutical  
Arithmetic . . . . Thursday, July 28, Afternoon.  
Pharmaceutics II . . . . Friday, July 29, Morning.  
Prescription Reading  
and Posology . . . . Friday, July 29, Afternoon.

Practical work commences on Tuesday, August 2, in the University Laboratories.

Entry forms are available from the Board only. Fee for part or whole of the examination is £3/3/-.

Applications close with the last post on June 30, 1955. Watch this column for further announcements.

P. E. COSGRAVE,  
Registrar.

Fifth Floor,  
Winchcombe House,  
52 Bridge Street, Sydney.

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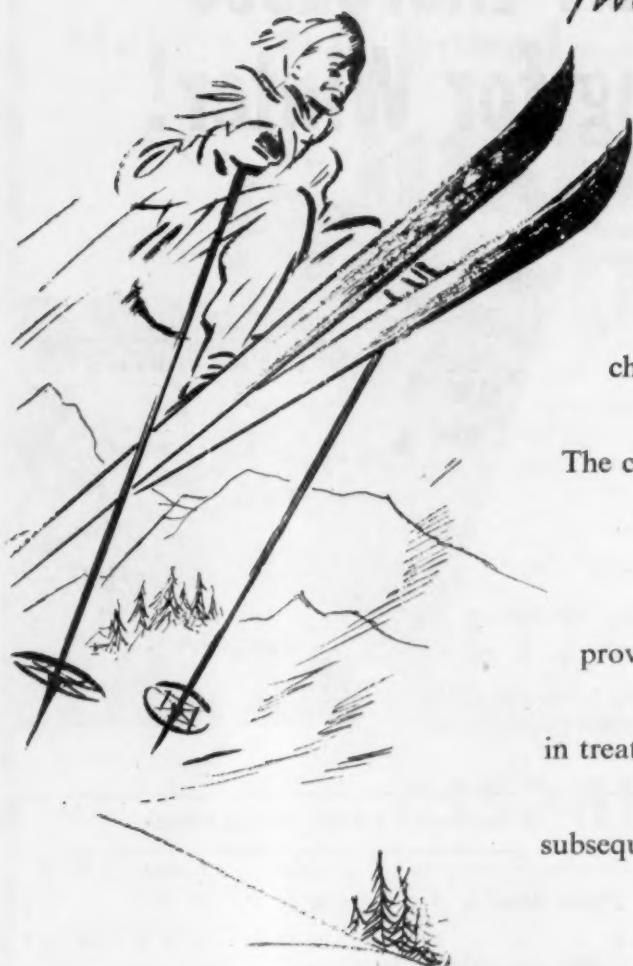
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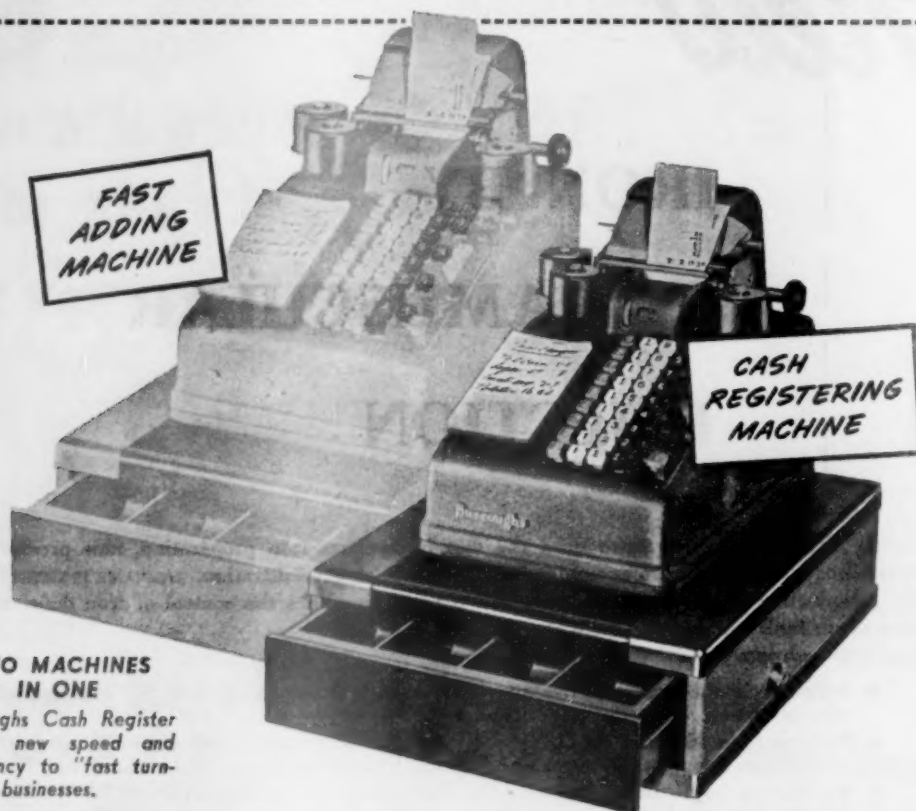
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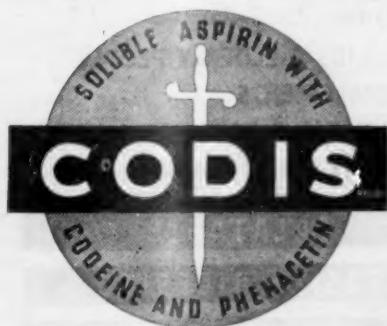
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New Series: Vol. 36—No. 426

Old Series: Vol. LXX—No. 834

June 30, 1955

## A New Edition of the A. P. F.

THE 8th Edition of the Australian Pharmaceutical Formulary (A.P.F.) is now on the printing press, and will be published and ready for distribution at the end of July.

This edition has been completely revised, both in its arrangement and in its contents, and will replace all previous editions.

The work of revision has been in progress continuously and steadily for over three years, but in recent months has been intensified.

Delays which are inevitable in a project such as this, carried out by honorary workers without the backing of full-time staff, laboratory assistants, etc., have prolonged the task of bringing this edition to press. The production of the A.P.F.—the only completely Australian formulary for general use—has always been a labour of love, and the present edition is no exception. The Editorial Committee and those who, inspired by their enthusiasm and devotion, have co-operated, are deserving of the warmest thanks of chemists throughout the Commonwealth.

One might ask what activates men of eminence in their profession, and upon whose time there are such insistent and heavy demands, to devote themselves to an undertaking such as this; and in the answer one might expect to find soundly based arguments in support of the utilisation of the results of their efforts.

There is no doubt that the Editors of the A.P.F. and their helpers were, in the first place, convinced that their work would lead to the production of something of practical value and use. It is equally certain that they believed that they were rendering a service to the professions to which they belonged and to the public generally. The very fact that they have worked unremittingly over a period of years in the production of this Formulary must be accepted as an expression of their faith in the usefulness of the work.

The first edition of the A.P.F. was produced in 1902. In the introductory note to that volume it was stated that one of the objects was to counteract the increasing practice of medical men ordering preparations, the composition and strength of which were alike unknown to the prescriber and dispenser. The Editors stated that they believed publication of a book of formulae for non-official preparations in general demand for dispensing, placed in the hands of the medical profession, with an invitation to adopt the printed formulae

whenever practicable, would meet with general approval.

By 1911, when edition two was published, conditions apparently had changed somewhat. There was noticeable, according to the introduction to that volume, "a greatly increased tendency upon the part of physicians to prescribe medicines compounded according to stated formulae."

Medical men, it was stated, frequently deplored the fact that in the case of the newer drugs especially they were unaware of the solubilities, incompatibilities and general characteristics, and were driven against their inclination to prescribing proprietary medicines containing these substances.

The compilers of edition two state that their first object was to place at the disposal of the physician a series of preparations, correct in their constituents, both physically and chemically, and also to place in the hands of pharmaceutical chemists a set of workable formulae with full directions as to their manipulation.

Very great changes in dispensing and prescribing practice have taken place in recent years. Chemotherapeutic agents, antibiotics and other specifics, developed in the research laboratories and produced by great chemical manufacturing firms, have made their impact on the volume of compounding of individual prescriptions from the stocks of drugs in the dispensing departments of retail pharmacies.

In addition to the efforts of the research laboratories, two other forms of commercial enterprise dominate the modern pharmaceutical stage. One is the "re-packer" of the basic commodities of the research laboratories. The other is the "ethical compounder," who presents popular drugs in appealing presentations, through a streamlined ethical merchandising organisation. To some considerable extent the pharmacist can become, in his own pharmacy and through the instrumentality of such works as the A.P.F., the scientific "ethical compounder" of modern times.

This is progress. The old order is changing and giving place to the new. We acknowledge that the trend in medicine is affecting the whole routine of pharmaceutical practice. The manufactured tablet and the injection have, to a very large extent, supplanted medicines prepared from drugs in the pharmacy. The manipulative skill required of the

pharmaceutical chemist in earlier days at almost every operation is now less often called into play.

But do not let us err by assuming that "diminished compounding" means "no compounding." The facts are that formularies are still demanded wholeheartedly by the medical profession and the pharmaceutical profession.

Publication of a new edition of the A.P.F. is an indication that leaders in the professions of pharmacy and medicine believe there is still an important place for prescribing by physicians of medicines to be compounded and dispensed by chemists according to the particular and specific needs of individual patients. It suggests also a belief in the relative predictability and certainty of action of the proven and accepted *materia medica* of earlier pharmacopoeae.

There is a growing feeling that most people, seeking medical attention, do not require the heavy artillery of chemotherapeutic and antibiotic treatment. This is borne out by the restrictions placed on such drugs under the British Health Scheme. Most ills are minor ills and do not require major treatment.

Due recognition is given in this work, as might be expected, to modern *materia medica*, but the appearance of the formulary indicates that there is still a place for prescribing and dispensing, as we have known it in the past.

There are yet many maladies for the treatment of

which specific remedial agents have not been developed. The appearance of each "wonder drug" has been followed by criticisms of indiscriminate administration, leading to drug sensitivity and drug resistance. There are many ailments in the medical calendar for which no specific scientific agent has yet been discovered.

Many more ailments fall into a different category altogether. Most of us become afflicted frequently with extremely uncomfortable and distressing conditions rather than with life-threatening infections. Many of the older treatments remain as sound and true as ever. The thought of a "swift, specific, remedial chemotherapeutical agent" for occupational dermatitis (to quote an extreme case) is laughable; but it is surprising how wise passive treatment can be. "Over-active" treatment can and often does run counter to the natural restorative processes. This is a lesson of modern times.

It is not surprising that the discoveries in the medical and pharmaceutical sciences in the past quarter of a century have led to a decline in the art of prescribing.

The A.P.F., therefore, should be welcomed as a guide in this field. The book is worthy of the fullest support of the entire pharmaceutical profession. By fostering its use by physicians, pharmacists will assist in retaining as part of their every-day work a measure of true pharmacy.

## THE MONTH

### News of Pharmaceutical Events at Home and Abroad

#### *Quotation for the Month*

"The status of every calling in the community is determined by the equality of the men who belong to it and by the esteem in which its leaders are held. The skill and experience, wisdom and sagacity, which go to the making of the great lawyer or doctor or architect, are handed on from generation to generation through his colleagues and pupils till they become part of the inheritance of his profession."

(From the Sir Richard Stawell Oration delivered by C. G. McDonald, M.C., at a meeting of the Victorian Branch of the B.M.A., October 6, 1954).

#### *A.N.Z.A.A.S. Meeting in Melbourne*

Circular number two in connection with the thirty-first meeting of the Australian and New Zealand Association for the Advancement of Science to be held in Melbourne from August 17 to 24, 1955, has been issued.

This circular contains the tentative, general and sectional programmes of the meeting, descriptions and full

details of all general and sectional excursions, the names of office-bearers and general information about the meeting.

The programme for Section "O" includes two evening symposia — one on "Colour Photography in Pharmacy and Allied Sciences" and one on "The New Australian Pharmaceutical Formulary." The latter symposium will be led by Dr. Byron L. Stanton, Editor in Chief of the A.P.F.

The full programme of individual papers to be read during conference week has been promised. Those already listed are:—

"The Pharmacology of some Hyoscine Esters," by E. I. Rosenblum and Professor F. H. Shaw.

"Chlorine Responses in Isolated Tissue," by J. G. Landers.

"Chlorine Foot-baths," by Miss N. Ganderton and Miss D. Sayers.

"Solid Chlorine Applications," by N. C. Manning.

On Saturday, August 20, there will be a very interesting excursion to new laboratories situated in the Dandenong Ranges.

Visiting members will be entertained by the Pharmaceutical Society at a buffet dinner at the Union Hall, University of Melbourne, on Saturday, August 20, and several excursions have been arranged.

Those interested in these meetings may obtain details and membership of A.N.Z.A.A.S. from their State Pharmaceutical Society. President-Elect for Section, "O" Melbourne meeting is Mr. S. E. Wright, Pharmacy Department, University of Sydney.

The President-Elect of A.N.Z.A.A.S., Professor R.v.d. R. Woolley, O.B.E., M.Sc., M.A., Ph.D., Sc.D., F.R.S., will deliver his Presidential address, "Astronomy and Cosmology," in the Melbourne Town Hall on the evening of August 17.

Other public addresses of general interest include: "The Artificial Modification of Rainfall," by E. G. Bowen, Chief of the Division of Radiophysics, C.S.I.R.O., Sydney (August 18); "Preventive Medicine, Past and Future," by Professor Sir Macfarlane Burnet, Director of the Walter and Eliza Hall Institute of Medical Research, Melbourne (August 19). On Sunday evening, August 21, a forum will be conducted in the main hall of the National Museum, Russell street, Melbourne, the subject of discussion being "Will Science Explain the Nature of Life?"

Membership of A.N.Z.A.A.S. requires no special academic qualifications and members may attend the meetings of any of the Sections as well as the public lectures and discussions.

### ***Flood Relief***

Details of collections to the Flood Relief Appeal opened through these columns in March have been published in the March, April and May issues of the Journal.

The full amount collected through the Journal, totaling £6668/0/6, has been remitted to the Treasurer of the New South Wales Branch of the Federated Pharmaceutical Service Guild of Australia, for distribution to those who suffered losses in the floods in New South Wales. When collections within New South Wales are taken into account, the total sum available for distribution, according to advice received from the Secretary of the New South Wales Branch of the Guild, exceeded £11,800. In a covering letter sent with the formal acknowledgement of receipt of the balance of the donations, the N.S.W. Secretary wrote: "The response and reaction of the recipients of funds show that they all felt a sense of gratitude which they could not express in mere words."

There were also floods in the State of Queensland, and some chemists in that State suffered substantial losses. Offers of assistance were conveyed through the Queensland Secretary, but whilst grateful for the offer of assistance from the Journal Floods Fund, those affected preferred not to participate.

The fund being now closed, the sponsors wish to express their appreciation to all who supported their appeal for this worthy cause.

### ***Price Cutting Increases***

The P.A.T.A. fifty-ninth annual report for Great Britain states that price cutting in the U.K. is on the increase and is causing concern to the P.A.T.A. Council.

It is said that whilst the majority of the cases reported have been satisfactorily resolved, the operation of certain price-cutting traders in London area has caused serious concern to the Association. Close attention has been given to ways and means of dealing with the position impeding the question of closer co-operation of manufacturers whose products have been subjected to price cutting.

During the year P.A.T.A. representatives in the U.K. made 1640 calls on traders and effected 1884 test purchases.

### ***Reciprocity With Great Britain***

Some time ago the Pharmaceutical Society of Great Britain raised the question of reciprocal agreements with the Australian States.

These agreements which have been in force for many years are based on courses of training which include periods of continuous and concurrent apprenticeship together with academic studies, leading to a final qualifying examination.

The proposal from Great Britain was that consideration be given to revision of the agreement in view of changing conditions and new systems of pharmaceutical education which are being evolved, some of them providing for continuous full-time training in University or other teaching establishment with a minimum period of full-time practical experience in a pharmaceutical establishment. In the replies sent from some of the States it was pointed out that alteration of the basis of reciprocity on short notice would create problems in some of the Australian States as well as in U.K. because of lack of unanimity in regard to the system of education and training best suited to the requirements of the various States.

The Assistant Secretary of the Pharmaceutical Society of Great Britain has now advised the State Boards in Australia that their replies have been considered. He points out that for apparent reasons only certain of the pharmaceutical authorities in Australia were in a position to agree to the proposal that in future reciprocal registration should be applicable only if the course of studies for qualification comprised three years of academic full-time training in a University or similar institution in addition to a period of practical training.

The Council of the Pharmaceutical Society of Great Britain therefore decided to re-examine the whole question of reciprocal recognition in five years, by which time it was hoped that sufficient progress would have been made to enable agreement to be reached on a new minimum basis.

### ***Uniform Poisons Schedules Under Consideration***

It has been revealed that the question of bringing about uniformity of Poisons Schedules and of the packaging and labelling requirements for poisons is under official consideration.

Representatives of the State bodies administering the Poisons Laws were recently called into conference at the instigation of the Commonwealth Department of



Health and have prepared a report. It recommends that Poisons Schedules in all States should be brought into line and become identical in content and designation.

It is further recommended that the requirements in regard to labelling and containers should be identical in all of the States.

Many attempts have been made in the past to bring about such a reform. If it can now be achieved by agreement between States, the public, the administering bodies and in particular the manufacturers and distributors whose activities extend to more than one State will benefit greatly.

### **Medical School in Western Australia**

Students in Western Australia seeking to proceed to a medical degree must under present conditions go to one of the other States for training, there being no medical faculty in W.A.

Many moves have been made to bring about facilities for training medical students in W.A. and earlier this year the Government appointed an influential committee to report on the matter. The committee's report has been submitted and contains the following points:—

1. A medical school designed to meet the needs of W.A. could be established as a faculty of the University of W.A.

2. It would cost £278,046 to establish the medical school.

3. At the present economic level the annual running costs would not exceed £94,716.

4. The committee strongly recommends the setting up of a complete school with training in all years of the course.

It recommends that the clinical teaching should commence in 1957 for W.A. students who have completed their pre-clinical course at the University of Adelaide and that pre-clinical training in W.A. should start in 1958.

"The Medical Journal" for June 18, 1955, devotes its leading article to this subject and concludes—"the most important point in this project is that the Government of W.A. has accepted the report of the committee in toto . . . but we may take it that a Medical School is about to be established in W.A."

### **Another Pharmacy Supplement**

For the third time this year, pharmacy has been singled out by the metropolitan daily press for a special supplement. Latest manifestation of this excellent kind of public relations activity was the eight-page souvenir published on May 31 by "The News," Adelaide's afternoon newspaper. The theme of the supplement, adopted by "The News" on the suggestion of Mr. K. G. Attiwill, was "Pharmacy Serves the Community."

The two previous supplements, which were also initiated by our Public Relations Director, were published by "The Daily Telegraph," Sydney, and "The Argus," Melbourne, to mark the opening of Guild House in February. "The News" followed within three months without any "peg" on which to hang the idea except that, in its own words in the introductory article of the supplement, it "recognises the achievements of the

Guild, and the high standard of service to the community which its members have preserved."

In addition to co-operating with "The News" Melbourne office in planning the supplement, Mr. Attiwill spent a day in Adelaide with the editorial and advertising representatives of "The News." Mr. Walter C. Cotterell, President of the Pharmaceutical Association of Australia and President of the South Australian Branch of the Guild, co-operated closely with Mr. Attiwill in the final stages of producing the eight-page supplement, by "seeing the pages to bed," as the pressman's phrase goes.

Two other distinguished entities completed the quartet of co-operation in producing an admirable supplement—the Pharmaceutical Society of South Australia and the Pharmacy Department of the Adelaide University.

### **Pharmaceutical Ethics in India**

The Indian Pharmaceutical Association has adopted a Code of Ethics which in the main part somewhat resembles those with which we are familiar. The following extract from the section dealing with the pharmacist in relation to his profession, is worthy of quoting:—

#### **"Professional Vigilance:**

It is not only sufficient for a pharmacist to be law abiding and to deter from doing things derogatory to Society and his profession, but it should be his bounden duty to make others also fulfil the provisions of the pharmaceutical and other laws and regulations. He should not be afraid of bringing or causing a miscreant to be brought to book, may be a member of his own profession. Whereas it is obligatory for a pharmacist to extend help and co-operation to a fellow-member in his legitimate needs, scientific, technical or otherwise, he is to be, at the same time, vigilant to weed the undesirable out of the profession and thus help to maintain its fair name and traditions."

### **Pharmaceutical Society President in South Africa**

Mr. C. H. Price, of Port Elizabeth, was elected President of the Pharmaceutical Society of South Africa at the Annual General Meeting held in Johannesburg on May 12.

Mr. Price has had a distinguished career in Pharmacy and in pharmaceutical education and his list of achievements is impressive. At the time of his election he was head of the Department of Chemistry at the Technical College, Port Elizabeth; Examiner in Pharmacognosy for the South African Pharmacy Board; Scientific Editor of "The South African Pharmaceutical Journal" and Secretary of the Cape Midlands Pharmaceutical Society.

Mr. Price was educated at the Wigan Mining and Technical College (1923-1926) and the University of Manchester (1927-1930). He holds pharmaceutical qualifications of Great Britain (F.P.S.) and South Africa (M.P.S.) and has been a Demonstrator in Pharmaceutical Chemistry and Lecturer in Physical Chemistry and Pharmaceutics. He was with Parke, Davis & Co. from 1934-1942 and with Savory and Moore from 1945-1946.

Mr. Price has a number of publications to his name and has been an occasional contributor to this Journal.



# SCIENCE SECTION



EDITED BY A. T. S. SISSONS, B.Sc. F.P.S.

## SCIENCE CONGRESS, MELBOURNE A.N.Z.A.A.S.

Melbourne Meeting, August 16-24  
Section "O." Pharmaceutical Science

Arrangements for the conference are well advanced and a good and varied programme has been drawn up.

Section "O" will meet mainly at the College of Pharmacy. The first meeting of a social nature will be on **Tuesday evening, August 16**, at the College. It is hoped that Interstate visitors will attend this informal function (any time between 6.30 and 10.0) to meet one another and get all preliminary information before the work of the section commences.

A strong excursions and social committee has been set up and full provision is being made for the entertainment of visiting ladies.

**Wednesday, August 17**

A.m. General Assembly. Anatomy Department, University (collect programmes, handbook, badges, invitations, etc.).

8.15 p.m. Presidential Address. Astronomy and Cosmology. Melbourne Town Hall.

**Thursday, August 18**

9.30 a.m. Section B—Chemistry. Presidential Address. Professor R. J. W. Le Fevre.

11.30 a.m. Section "O"—Pharmaceutical Science. Presidential Address. S. E. Wright (Department of Pharmacy, University of Sydney).

**Monday, August 22**

9.30 a.m. Liversidge Lecture. New Trends in Fats Research. F. R. Shorland (D.S.I.R., New Zealand).

Further information from E. E. Nye, B.Sc., F.P.S. (Vic.), Secretary (Section "O"—Pharmaceutical Science), College of Pharmacy, 360 Swanston street.

## IMPORTANT APPOINTMENTS, MEDICAL SCHOOL, MELBOURNE

The Council, University of Melbourne, recently appointed Dr. R. R. H. Lovell, M.D., M.R.C.P., M.R.C.S., as first occupant of the Chair of Medicine, and Mr. M. R. Ewing, M.B., Ch.B., F.R.C.S., as first occupant of the Chair of Surgery.

Dr. Lovell will direct clinical teaching and research and while having administrative headquarters in the University, will carry out his main clinical practice, research and teaching at one of the four teaching hospitals to be selected, where he will rank as Physician to In-Patients, and have his own professorial unit. The staffs of the hospitals concerned have agreed to allocate

## ARTICLES

- Science Congress, Melbourne.
- Important Appointments. Medical School, Melbourne.
- Attack on Poliomyelitis.
- Addiction-producing Drugs.
- Disinfectants.
- Heroin Manufacture Banned.
- Attack on the Tubercle Bacillus.
- Sterilisation of Hospital Equipment.
- Rubber Stoppers and Bacteriostatic Action.
- Glass Technology and Pharmacy.
- Hypotensive Drugs.
- Elixir of Vitamins.
- The Story of Borax, Its Versatility.
- Corrosive Poisoning.
- Poisonous Substances.
- Evaluating Enteric Coatings.
- Scientific Approach to Cancer.
- Radiolabelled Human Serum Albumin.
- Insulinase and Diabetes.
- The Carlsberg and Wellcome Foundations.
- Possible Competitor for Aspirin.
- General Medical Council: Approved Names.

a reasonable proportion of clinical cases to the Professor of Medicine for his research purposes. Ultimately, the University visualises similar appointments in each of the four teaching hospitals.

Dr. Lovell will come to Melbourne with the highest personal and professional recommendations of senior colleagues in London. He qualified as a medical practitioner at St. Mary's Hospital, London, in 1941, and was appointed House Physician to Professor Pickering. He enlisted in the Royal Navy and served in many theatres of war until 1946. For his service as a surgeon-lieutenant he was mentioned in despatches in 1946. During 1946-47 he was House Physician at the Brompton Chest Hospital and in the latter year, Registrar, and subsequently for three years, Senior Medical Registrar, at St. Mary's Hospital, London. Since 1950 Dr. Lovell has been Lecturer in Medicine at St. Mary's Hospital and Medical School, and Assistant in the Rheumatism Research Unit of the Department of Medicine, under Professor Pickering.

Dr. Lovell has already had seven years of experience as a successful clinical teacher. His research paper on the nature of clubbing of the fingers, published in 1950, is regarded as a little classic. He has published in his own name or in association with collaborators papers on the use of cortisone and corticotrophin as tools to try to discover the nature of connective tissue diseases, especially rheumatoid arthritis; and on the effect of cortisone and allergy. In 1953 he visited North America under the sponsorship of the Nuffield Foundation to investigate the teaching and practice of medicine.

Mr. Ewing is a Scotsman, educated in the University of Edinburgh, where he graduated in 1935. For several years he held appointments as House Surgeon, and subsequently became clinical tutor and Assistant Surgeon in the Royal Infirmary in that city.

He also, like his fellow Professor of Medicine, served in the R.N.V.R., in Combined Operations, in the U.K. and at Malta until the end of 1945.

As senior lecturer in surgery to post-graduate students, Mr. Ewing has been a full-time servant of the University of London. He is also an honorary consultant in Hammersmith Hospital. In 1950, he was granted a British-American Exchange Fellowship of the British Empire Cancer Campaign, and spent a year at the Memorial Cancer Centre in New York. The same year he was awarded a Hunterian Professorship by the Royal College of Surgeons of England.

Mr. Ewing's main clinical interests are in cancer of the mouth, in the surgical management of which he has a wide experience, cancer of the skin, and proc-

tology. He has published twenty-two papers in the British professional journals.

The terms of his duties, and the facilities available to him in Melbourne to enable him to carry out his responsibility for teaching and research in surgery, are similar to those for the professorship in Medicine.

## ATTACK ON POLIOMYELITIS

### Development of Salk Vaccine

The following was an editorial note in *The Pharmaceutical Journal*, April 23, 1955.

"During the past 100 years poliomyelitis has changed from a relatively uncommon complaint to a formidable epidemic disease. The character of the disease has altered, too, for a century ago paralytic symptoms, which today are so much feared, were rare. The first signs of change were noticed during the 1880's, when epidemics began to occur, almost exclusively among children under five years of age, and, surprisingly, the outbreaks were in countries in which sanitation and public health measures were most advanced. Gradually the disease became more widespread, and, by the 1920's, most countries in northern and central Europe, U.S.A. and Canada, and the temperate zones in the southern hemisphere had experienced epidemics. In the 1930's poliomyelitis spread towards the equator.

"The most alarming development of the disease took place after 1940. Not only did the incidence rise steeply, but older children and even adults took the infection in increasing numbers. The highly developed countries were again the most badly affected by the change. During the years 1940-1946 the annual number of notifications of the disease in Great Britain was between about 500 and 800. In 1947, a year of an epidemic, it jumped to 7,776, and subsequently it has remained on an elevated level, although varying considerably. The notifications in the past two years, for example, numbered 4,547 and 2,386 (provisionally). In the U.S.A. the number of annual notifications has increased fourfold since 1939, and in 1953 reached about 35,000.

"Knowledge of the virology of poliomyelitis has lagged behind the spread of the disease. The virus was discovered by Landsteiner and Popper in 1908, but not until 1931 was more than one immunological variety suspected. Study was hampered by the lack of a convenient method of growing the virus, but in 1949 a method of producing cultures in isolated animal tissue was discovered, and this revolutionised the study of the disease. In 1953, American workers confirmed the existence of three varieties of the virus, and, subsequently, a killed vaccine based on them was prepared by Dr. J. E. Salk of the University of Pittsburgh. Under the sponsorship of the American National Foundation for Infantile Paralysis trials of the vaccine on a scale that was considered sufficiently wide to provide adequate information have been conducted. They indicate that the vaccine's special merit is in the prevention of paralytic poliomyelitis, and the results are regarded by authorities as encouraging. However, many questions remain to be answered. It is not known, for example, how long the protection will last, or whether frequent booster doses will be required, and, if they are, whether reactions will be caused by the traces of foreign protein contained in the vaccine. The trials do not give any evidence as to whether the vaccine will be effective in infants, or in conditions other than those of the test—for example, those in Western Europe.

"The results of the test have been awaited eagerly by workers throughout the world, and their publication will allow further research work to go forward. In Britain, research is being organised by the Medical Research Council, and by members of the pharmaceutical industry, who also are co-operating in the M.R.C. tests. The opinion is held by some British authorities that an attenuated live virus vaccine is required to

provide protection for a worthwhile period, and at a number of centres research is proceeding on the elaboration of such a vaccine."

Speaking in the House of Commons, April 25, in reply to questions, the Minister of Health (Great Britain) said:

"Many interpretations have been put upon the attitude of this country to this development. Perhaps it is as well to put the facts in plain words to the House. This new vaccine involves inoculating our children at repeated intervals with a preparation derived from the kidneys of dead monkeys. The House and the country will surely agree that we must carry out intensive tests as to the exact effects so that we can eliminate any possible dangers from it. We are already doing this. We must also make sure, as we shall, that it is effective against the particular strains of the virus most commonly found in this country; indeed, it is not sure yet that it is fully effective in the case of children of about four or under, where our incidence of the disease is highest, and it seems that it may be less than normally effective against Type I of the virus—the commonest type over here.

"I mention these reservations because it is important to keep the picture in true perspective. But they in no way detract from the immense humanitarian value of this great discovery or affect our determination that our own people shall benefit from it to the fullest possible extent."

## ADDICTION-PRODUCING DRUGS

There are now only six countries who have not yet abolished or have not expressed an intention to abolish the use of diacetylmorphine. Reporting the fact at its fifth session (W.H.O., Tech. Rep. Ser., No. 95), the Expert Committee on Drugs Liable to Produce Addiction drew attention to the progress made towards a complete recognition of the dispensability of diacetylmorphine. This had been materially assisted by the increasingly general acceptance by national and international bodies of the committee's view as to the replaceability of the drug, in particular by less dangerous synthetic substances, and by the efforts of independent investigators whose comparative studies have afforded supporting evidence to this view. Of the drugs considered at this meeting, the committee came to the conclusion that the following should be regarded as liable to produce addiction:

6-methyldihydromorphine and its salts.

dihydrohydroxymorphinone and its salts

4:4-diphenyl-6-dimethylamino-3-hexanone and its salts

4:4-diphenyl-6-piperidino-3-heptanone and its salts

esters of 1-methyl-4-phenylpiperidine-4-carboxylic acid and their salts

Although the committee found no evidence to suggest that the myristyl ester of benzylmorphine possesses addiction liability, it was pointed out that it can be readily converted to benzylmorphine or morphine in yields of at least 50 to 60 per cent. This, it was felt, represented a degree of convertibility which constituted a risk to public health. Similarly, while  $\beta$ -4, 4-diphenyl-6-dimethylamino-3-heptanol has little or no addiction liability, the committee had specific information that the compound is readily convertible to acetyl derivatives (which have addiction-producing properties) in good yield. The committee's opinions on all these matters are to be communicated to the Secretary-General of the United Nations.

The committee took note of a report on a new group of substances of azocycloheptane (hexamethylenamine) type which are known to exhibit significant analgesic action, but have so far shown no addiction-producing or addiction-sustaining properties. A report was also received on the development of a new series of compounds of phenylcyclohexane, phenylmorphane, and

benzomorphan types. In at least one member of this series analgesic action of an intensity approximately equivalent to that of morphine has been observed. No tests for addiction liability have been made with any member of this series.

#### Addiction to Pethidine Hydrochloride

The committee considered a report on pethidine addiction as encountered at the Public Health Service Hospital, Lexington, Kentucky. This showed a high incidence of addiction among members of the medical, nursing and associated professions. Of 457 addicts, 76 were physicians, 79 were nurses, 2 were dentists, and 29 were from ancillary professions—a total of 186, or 41 per cent. When members of this group were interviewed, it was learned that, while they were aware vaguely of the risk of becoming addicted, they regarded the danger of addiction as less than with any of the common narcotics and felt that pethidine could be discontinued more easily. Also, pethidine was more readily available because many hospitals took less precaution to safeguard supplies of this drug. Many felt that less stigma was attached to the use of pethidine, and that the observable signs of pethidine addiction were less obvious to others than the signs of addiction to opiates. The committee expressed the view that pethidine is as dangerous as morphine as a potential addicting agent, that its use should be undertaken only with full realisation of this danger, and that its administration should be approached with the same attitude and attended by the same precautions as are recognised for morphine.—*Pharm. J.*, April 9, 1955.

### DISINFECTANTS

#### THE VALUE OF HYPOCHLORITES

By W. F. Lewis, B.Sc.

At the present moment there is a controversy raging over the relative effectiveness of hypochlorite solutions compared with quaternary ammonium compounds. One great bone of contention rests in the possible toxic effect of quaternaries if used for sterilising crockery, etc. This risk is considerably reduced when hypochlorites are employed. One well-known commercial product of the hypochlorite type is essentially a one per cent. electrolytic solution of sodium hypochlorite and contains 16.5 per cent. sodium chloride. It has been used for the sterilisation of salads and uncooked vegetables and fruits. In these days of communal eating such a precaution is necessary. It can also be used for sterilising drinking water, cupboards, rooms, domestic utensils, handkerchiefs and also for personal hygiene.

Furthermore in cases of emergency it can be used as a means of irrigating wounds and burns. In view of its composition it is an ideal bleaching agent.

Thus it can be seen that solutions of hypochlorites have many and varied uses, satisfying some of the conditions of disinfection not covered by the disinfectants described earlier in this and the previous article. One good example of this is the question of rapid, satisfactory sterilisation of a baby's feeding bottle and rubber teat. The old and still the most reliable method of doing this is by immersing bottle and teat in boiling water for 30 minutes. Use of a solution of hypochlorite is cleaner and less laborious, resulting in a sterile bottle and teat. Obviously the phenols, cresols and chloroxylenols, mercuric salts, acids, metals, permanganates and the many other types of disinfectants referred to, would be totally unsuitable for this purpose. There can only be one serious competitor for this particular purpose—the quaternary ammonium compounds.

A paper read to the Society of Medical Officers of Health by A. H. Walters stresses the need for all wash water to be kept free from the ever-increasing contamination. Great emphasis is placed on kitchen hygiene and the incidence of food poisoning and poliomyelitis. The conclusion is drawn that the presence of *B. coli* in wash water shows a poor hygiene standard. The

author of the paper refers to the use of a compatible detergent/hypochlorite mixture in the control of wash water infections and the possible adaptation of this method for the very necessary sanitation of ice-cream plants with or without the use of steam.

Hypochlorous acid has been employed as an antiseptic for wounds by Dakin, Daufresne, and Laraine Smith; an official (B.P.C.) solution containing it is well known under the name *eusol*, while the ingredients in powder form are known as *eupad*. In such a solution hypochlorous acid is obtained by double decomposition of bleaching powder with sodium carbonate, with the addition of boric acid or sodium bicarbonate. The presence of sodium borate or sodium carbonate in the resulting solution when freed from the precipitated calcium carbonate, ensures the stability of the solution, owing to the "buffer" action of the easily hydrolysable salt.

The toxicity of a dilute solution of hypochlorites is negligible and with increasing dilution there is a corresponding decrease in irritant and sensitising properties. But, according to Louis C. Barail, prolonged use of a concentrated solution (for washing floors, etc.), may result in dermatitis if it comes into contact with the skin. Prolonged inhalation of chlorine fumes may result in permanent lesions of the respiratory tract. Concentrated solutions of chlorine and chlorine gas are vesicants as well as toxic irritants.—"Export Review," March, 1955.

### HEROIN MANUFACTURE BANNED

The current licences for the general manufacture of diacetylmorphine (heroin), under the Dangerous Drugs Act, 1951, which expire on December 31, 1955, are not to be renewed. After that date licences will only be granted for the manufacture of such small quantities as may be required for purely scientific purposes, and for the production of nalorphine, for the manufacture of which diacetylmorphine is required as an intermediate stage. No further export of the drug is to be authorised, except where the export is requested by a Government for one of these two purposes. The import of diacetylmorphine will not be permitted.

This decision, announced by the Home Secretary (Great Britain) follows a resolution recently adopted by the Economic and Social Council of the United Nations at its 18th session, urging all Governments to prohibit the manufacture, import, and export of diacetylmorphine except for scientific purposes.

The drug is widely used as a sedative, particularly for coughs. It is said to be more powerful than morphine for the relief of pain, but the dangers of addiction are greater. It is, of course, for this reason that the importation or manufacture of diacetylmorphine has long been forbidden in the U.S.A.—"Manufacturing Chemist," April, 1955.

### ATTACK ON THE TUBERCLE BACILLUS

Dr. G. R. Brownlee, reader in Pharmacology, King's College, University of London, gave an address to the Pharmaceutical Society of London, on "The Attack on the Tubercle Bacillus." This was reported in "The Chemist and Druggist," March 26, 1955, as follows:—

#### Mode of Action of Bacillus

Dr. Brownlee said that the tubercle bacillus had a particular mode of action:—

(a) It contained a lipin substance which enabled it to reproduce and establish tubercles in the host. That was called the "cord factor" or "virulence factor."

(b) The ingested tubercle bacilli contained substances that resisted degradation by the ordinary defensive mechanisms. Instead of being taken up by polymorphonuclear leucocytes and carried to the lymph nodes for digestion and elimination, they were absorbed in situ by monocytes which might subsequently be con-



verted into a tubercle. The non-toxicity of the multiplying virulent tubercle bacilli for normal tissue or in tissue culture preparations had led some people to describe the association as symbiosis. Immunity of the bacillus within the monocyte appeared to indicate a biochemical lesion associated with a capacity to inhibit normal enzymic action in the monocyte.

(c) No pharmacological poison was excreted during the life of the bacillus or liberated by lysis after its death. Should multiplication ensue, a product of metabolism induced a state of hypersensitivity in adjacent host cells so that they reacted to the presence of the otherwise innocuous product tuberculin which then became responsible for the death of cells.

(d) During infection the host could develop a capacity to modify the course of the disease—an acquired resistance.

The cord factor was a lipin mixture, at present of unknown constitution. The capacity to attract monocytes seemed to be a non-specific effect of long-chain fatty acids such as phthioic acids and of the products containing them (lipopolysaccharides). The hypersensitivity effect seemed to be caused by tuberculin plus lipopolysaccharide. Caseation seemed to be caused by the inhibition of proteases by lipopolysaccharide. Acquired resistance was induced by an unidentified labile antigen.

Specific antibacterial chemotherapy was concerned only with preventing the organism from growing. An organism that was not growing achieved immunity.

The hypersensitivity effect was actively concerned with the spread of the disease. In the past, there had been confusion between hypersensitivity (allergy) and immunity (presence of protective antibodies). They appeared to be related because they were associated in tuberculosis and other infectious diseases. Those vaccines which had been proved by animal experiments to convey acquired immunity also produced delayed allergy. They were B.C.G., Vole bacillus, and glycerol-killed vaccine. The use of the demonstration of delayed allergy to presume the presence of protective antibodies after B.C.G. vaccination appeared to relate one phenomenon to the other. On the other hand the injection of heat-killed bacilli containing no capacity to confer any active immunity produced, in experimental animals, tuberculin sensitisation. Sensitisation had also been produced by a fraction extracted by paraffin but presumed to be contaminated with tuberculin protein. Any one of those two experiments would break down in their argument if the injected material contained even one living tubercle bacillus. That possibility was eliminated by the elaborate precautions taken by Raffel, who produced delayed hypersensitivity of the tuberculin type in guinea pigs by means of tuberculin wax plus the wax of the tubercle bacillus. More recently he described the same effect with a purified lipopolysaccharide fraction plus tuberculin.

Chemotherapy would be freed from its shackles in combating tuberculosis if the patient could be first desensitised.

#### Desensitisation in Man

Dr. Madigan and the speaker had recently described experiments in desensitisation in man. The experimental groups were drawn from those with phthisis and some with tuberculosis of the kidney and larynx, pharynx, buccal mucosae and tongue. Each patient showed a positive reaction to the Mantoux intradermal challenge.

The desensitising material consisted of old tuberculin and heat-killed bacterial vaccine (so-called bacterial emulsion). The initial dose injected intramuscularly was that amount of old tuberculin to which the patient was just sensitive by intradermal challenge, or 0.1 unit of old tuberculin, whichever was the larger, together with  $1.0 \times 10^{-7}$  mgm. bacillary emulsion. The amounts were increased until after 49 days 1.0 mil of old tuberculin and 0.01 mgm. bacillary emulsion were injected

daily. At that time and for as long a period as the daily injection of 1.0 mil tuberculin was maintained, all patients were found to be insensitive to intradermal challenge by the enormous dose of 10,000 units of old tuberculin.

Healing, lack of damage, etc., showed that desensitisation seemed to block the capacity of previously sensitised tissue to respond by a hypersensitivity phenomenon to the antigens of the tubercle bacillus. Two observations suggested that the immunity response (protective antibodies) was not modified. First the desensitising materials themselves contained no antigen capable of inducing active immunity; and secondly the patients' clinical status was improved.

The effects of raising an intradermal tubercle with B.C.G. vaccine in a group of eight desensitised people and their reaction to challenge with 1 in 100 old tuberculin sixty-two days later were observed. For comparison the same experiment was made in a group of eight Mantoux-negative nurses. A control group of tuberculous patients was similarly treated. The natural history of the tubercles raised in groups 1 and 2 was so similar that an observer could not distinguish one from the other. The natural history of the tubercles seen in group 3 was typical of Koch's phenomenon and differed dramatically by the persistence of the bleb which became serous and ulcerative and—once a crater was established—in the extent of the tissue damage. Also in that group, the parent tubercle often gave rise to daughter tubercles. The response to tuberculin challenge in the three groups showed that only the sensitised group remained insensitive to it.

Dr. Brownlee's conclusions were that previous knowledge of the tubercle bacillus altered some cells in a specific and permanent way. The antigen was tuberculin; the specifically directing substance, lipopolysaccharide. Subsequent knowledge of the tubercle bacillus caused those cells to autolyse and die. That was the hypersensitivity phenomenon.

That destructive process could be blocked and thus prevented by a process of desensitisation with tuberculin and bacillary emulsion.

If the prevalent view that the genesis of a B.C.G. tubercle in the Mantoux-negative nurse conferred active resistance was correct, could not the same conclusion be accepted for the same process in the tuberculous desensitised? If so it was to be observed that a state of delayed hypersensitivity was induced in the former, but not in the latter. That appeared to imply that those were two distinct processes arising from different causes.

#### STERILISATION OF HOSPITAL EQUIPMENT

A memorandum drawing attention to the report of the Central Pathology Committee of the Ministry of Health on the sterilisation of hospital equipment has recently been sent to hospital boards and committees (H.M. (54) 118). The equipment referred to includes dressings, gowns, towels, masks, caps, etc.; rubber gloves and glove powder; rubber tubing, rubber, gum and elastic catheters; surgical instruments; syringes and needles; bedding, and sputum containers. The memorandum first reviews heat sterilisation methods in general and then deals with the sterilisation of individual items.

It is suggested that for glove powder, starch powder (which has largely replaced talc) may be made up in small packets and sterilised with the dressings or it may be heated in shallow trays in a hot-air oven at 160 degrees C. and small packets inserted with the gloves before sterilisation. The memorandum points out that because of the sulphur content, rubber tubing for use in surgical or medical work demands different degrees of treatment, depending upon whether it is new or used. All tubing needs to be thoroughly cleansed before it is sterilised because of the risk of severe reactions from particulate matter in the lumen when the



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tubing is used for giving intravenous drips. New rubber tubing in 4-5 feet lengths should be boiled for half an hour in 1-1 per cent. washing soda. Care must be taken that the solution fills the lumen and the tubing. It should then be rinsed with hot tap-water under pressure and pulled through with a piece of gauze or a small brush mounted on stiff wire, after which it should be well rinsed with hot water under pressure and then with distilled water, and finally drained and dried. If the tubing is not to be used for the assembly of sets which will be autoclaved within four hours, it must be thoroughly dried. Used rubber tubing should be similarly treated, except for the preliminary boiling in alkali solution. Periodically, pieces of used tubing should be split open for inspection. New rubber bungs should be boiled in alkali solution, rinsed in hot tap-water, then in distilled water, and dried. Used rubber bungs should be scrubbed in hot soapy water, rinsed in distilled water and dried. Tubing and bungs should be sterilised in an autoclave at 120 degrees C. for 15 minutes and this time and temperature must not be exceeded. Gum-elastic catheters may be sterilised by treatment with formalin solution (0.5 per cent. for one to two hours) or formaldehyde vapour. It is recommended that for plastic tubing the advice of the makers should be followed. Polythene tubing may be sterilised by boiling for five minutes, although repeated boiling may affect its quality.

The treatment of syringes and needles is discussed at length. As a lubricant liquid paraffin, or liquid paraffin four parts in one part technical ether, is suggested, with silicone fluid M.S. 550, diluted one part in two parts technical ether, as an alternative. Sterilisation in a hot-air oven or in an autoclave are the methods recommended and it is emphasised that although it is common practice to prepare needles and syringes for intramuscular and subcutaneous injections by boiling for five minutes, this does not ensure bacteriological sterility.—Pharm. J., January 22, 1955.

## RUBBER STOPPERS AND BACTERIOSTATIC ACTION

By H. S. Grainger, F.P.S.

The British Pharmacopoeia requires that rubber stoppers to be used as closures for multi-dose containers of injectable fluids should be stored for not less than 48 hours in a solution of the same or greater concentration of the bacteriostatic agent to be employed in the injection fluid. This is because it has long been shown that rubber takes up such compounds and may do so to such an extent that the solution would not be bacteriostatic. Even after such treatment, prolonged contact with the solution may remove the bacteriostatic agent, but no attempt to determine the length of time required to do this has been made. Wiener has described his findings in this connection using thiomersalate. He has shown that certain constituents of rubber such as charcoal and crude rubber are strongly adsorbent for thiomersalate. The sulphur compounds did not have this property. Black rubber caps treated by the B.P. method were used to close vaccine bottles containing serial dilutions of thiomersalate. After five weeks storage the dilutions were inoculated with *Staph. aureus*. The results indicated that the B.P. method did not prevent further absorption of the compound. The author suggests that black rubber caps or caps containing carbon black should not be used.—"Export Review," March, 1955.

## GLASS TECHNOLOGY AND PHARMACY

Progress in Glass Research in Great Britain

Glass has been known from the very early times, and its manufacture for ornamental purposes can be traced back to the third millennium B.C. It was not, however, until the nineteenth century A.D. that a sys-

tematic study of the chemistry of glass began to be made. In this field Britain lagged behind, and when, in 1914, the German source of special glass for scientific purposes was cut off, serious difficulties arose in the British glass industry. With foresight, Dr. W. E. S. Turner, of the Chemistry Department of Sheffield University, recommended that that University should establish a department of glass technology. He received enthusiastic support from a number of glass manufacturers, and, subsequently, his recommendation was adopted. The Department was the first at any university to be devoted to the teaching of glass technology, and to undertake both fundamental research into glass problems and research into manufacturers' technical difficulties. Dr. Turner was its head, and, later, he was appointed to the chair of glass technology, becoming the first professor in that subject in the world. During the time since the establishment of the Department many changes, mechanical and technical, have taken place in the glass industry. Contributing to these has been the need to supply glasses that have special chemical properties. The preparation of pharmaceutical products, whether at the dispensing bench or in industry, involves the use of glass in many stages. Pharmaceutical considerations often call for glass that, for example, is resistant to both acids and alkalis; moreover, it must be easily moulded into useful and well-designed shapes. These qualities are not always compatible. That the importance of glass technology to pharmacy is increasing is reflected in the fact that half of a Symposium Session at the British Pharmaceutical Conference two years ago was devoted to the subject, and a specialist speaker (from Sheffield University) opened the discussion. As it reported elsewhere in this issue, some of the glass-research work in Sheffield has just been taken over by the research association of the industry, for the demands of the industry had become more than could be conveniently dealt with by a university. The research association will work in close co-operation with the Department, and, in fact, is to be housed in the same building. A further indication of the continuing happy relations between the industry and the University Department is that although the manufacturers are subscribing a substantial amount annually towards the cost of the work of the Association, they have undertaken also to continue to give financial support to the University's research. Developments in the production of improved glass will be watched by pharmacists with interest. An element of urgency has no doubt been introduced into the research in view of the increasing use of plastics for apparatus and containers that have traditionally been made of glass.—Pharm. J., April 9, 1955.

## HYPOTENSIVE DRUGS

An address on *Rauwolfia* and some other hypotensive drugs was given to a meeting of the Manchester and Salford Branch of the Pharmaceutical Society by Dr. J. M. Rowson (curator of the Society's museum, London).

Dr. Rowson said *Rauwolfia serpentina* was a mild hypotensive agent with definite bradycardic and sedative actions, and was most effective in the treatment of mild hypertension or for use in association with more drastic hypotensives such as *Veratrum viride* in the treatment of severe or chronic hypertension. Dr. Rowson dealt with the biological and geographical sources of the drug and described its diagnostic characters. He said that some fourteen alkaloids had now been isolated from that species; reserpine, isolated in 1952, was now claimed to be its chief active constituent. *Rauwolfia* exerted its activity upon the hypothalamus and so differed in mode of action from other sedatives. There was considerable variation in potency between different commercial varieties of *R. serpentina*, and reserpine was also present in certain other species of

rauwolfia. The increasing demand for rauwolfia during the past two years had resulted in a number of different species being offered on the market as *R. serpentina*, and today it was rare to find a sample which was not adulterated. That adulteration could only be detected with certainty by microscopical examination. The lecture concluded with a brief description of the use of *Veratrum viride* as a strong hypotensive, and of rutin, derived from *Fagopyrum esculentum*, as a mild hypotensive.—"Chemist and Druggist," March 26, 1955.

## ELIXIR OF VITAMINS

By T. D. Whittet

In a recent address to chemists at Sunderland, England, T. D. Whittet, chief pharmaceutical chemist, University College Hospital, London, gave the following formula for

### Elixir of Vitamins

Concentrated solution of vitamins A and D (see below) .....	9 gm.
Riboflavin .....	0.6 gm.
Nicotinamide .....	7.5 gm.
Aneurine hydrochloride .....	1.5 gm.
Ascorbic acid .....	40.0 gm.
Calcium pantothenate .....	1.5 gm.
Pyridoxine hydrochloride .....	0.75 gm.
Essence of sweet orange (Bush) ..	7.5 mls.
Elixir of saccharin .....	40.0 mls.
Tween 80 .....	90 gm.
Propylene glycol .....	650 mls.
Distilled water to .....	1 litre
Concentrated Solution of Vitamins A and D	
Calciferol .....	0.21 gm.
Vitamin A in Oil .....	40 m. units
Arachis oil to .....	45 gm.

Mix thoroughly the dry riboflavin and nicotinamide. Transfer to a conical flask and add 25 mls of water. Heat until dissolved. Dilute to 200 mls, add ascorbic acid, aneurine hydrochloride, calcium pantothenate and pyridoxine hydrochloride and stir until dissolved.

Mix the concentrated solution of vitamins A and D and Tween 80 in a glass mortar, then add the aqueous solution in small portions triturating well between each addition. Add the remaining ingredients and make up to volume.

## THE STORY OF BORAX. ITS VERSATILITY

With a history of at least 4,400 years, borax has lately been in the news as a topic of financial importance. An American group made an offer for the British Company, Borax Consolidated Ltd., which owns substantial deposits of borates in California. The subsequent negotiations, which ended with the company rejecting the American offer, aroused wide interest in borax. This has led to the company producing a short history of borax and its uses, which underlines the astonishing versatility of this ancient material. The rapidity with which these uses are developing is illustrated by the production figures. In 1938 the annual U.S. production was 193,000 tons; by 1953 this had risen to 639,000 tons. In 15 years the world demand for borax has trebled.

The established uses of borax are familiar to the chemist. Borax and boric acid are basic constituents of washing powders, fertilisers, ointments, eye lotions and dusting powders. The remarkable properties of boron are strikingly shown in agriculture. Boron is an important trace nutrient; most standard fertilisers contain the equivalent of 0.2 to 5 per cent. of borax. But just as minute quantities of boron benefit plant life, so large amounts destroy it. Hence the use of borax for efficient general weedkillers, an application which is expanding and which has resulted in new products.

Borax can be used for timber preservation, for anti-freeze mixtures (as corrosion inhibitor) and for fire pre-

vention. The latter can be achieved by treating flammable materials with a solution of borax and boric acid, a fact confirmed by researches at the Royal Aircraft Establishment, Farnborough, and one which deserves wider attention.

The use of borax in glass and ceramics completes the better-known applications of this chemical. What of the future?

Great possibilities await the new organic borates which are undergoing tests for use in emulsion paints, fire retardants, plastics, protective coatings, solders and brazing fluxes, and as special solvents and for medical purposes. Several complex organic borates have been patented as additives for lubricating oils and petrol. Last summer "Boron Supreme" petrol was launched in the U.S. It contains an organic boron compound which is claimed to cut engine wear by nearly 50 per cent., to prevent pre-ignition and to give longer valve life. Even in the latest technology, nuclear energy, boron finds uses. It has a great capacity for absorbing neutrons, and so the element itself and various compounds of it are used in control rods for atomic reactors. They are also used in the screens around reactors and in biological shields. This capacity to absorb neutrons is also turned to account in instruments for measuring neutron flux (the amount of radiation from an active source).

These modern examples of the versatility of borax are far removed from its early history when the Sanscrit name "tincal" was applied to marsh deposits of crystalline borax found 15,000 feet up in the Himalayas. They are far removed indeed from the early days of borax in the U.S. when F. M. Smith found enormous deposits in Nevada and later in California. But from these discoveries stemmed the establishment of Borax Consolidated with its substantial and valuable holdings in borax deposits in the U.S. and other countries, holdings which make up for the lack of borax reserves in the British Commonwealth.—"Manufacturing Chemist," April, 1955.

## CORROSIVE POISONING

In the *British Medical Journal* for April 16 (p. 962), J. D. P. Graham discusses corrosives likely to be encountered and the diagnosis and emergency treatment of individual syndromes.

**Lysol, phenol, cresolic preparations.**—If the stomach is to be washed out, the addition of half an ounce of magnesium sulphate or a pint of milk to the washing water is advantageous. Guard the respiration by placing the patient prone and clearing the throat. Administer 100 mgm. of leptazol subcutaneously, or 0.5 gm. nikethamide intramuscularly, if breathing is poor; wash the external burns with soap and water, and order hot-water bottles as a simple measure to combat shock while awaiting immediate transfer to hospital.

**Inorganic acids and caustic alkali.**—Place the patient prone; clear the throat; do not use a stomach tube. For acid burns, endeavour to give a few sips of Milk of Magnesia diluted 50 per cent. with water; chalk, or any gastric antacid, or dilute toilet soap in water; or the whites of two eggs in a pint of water; or, if none of these is available, weak sodium bicarbonate (one teaspoonful to one pint of water). The danger of the latter is the violent evolution of gas. For alkali give one part of domestic vinegar to three parts of water. Administer 1/6 grain of morphine and 1/100 grain of atropine intramuscularly. If oxygen is available administer it. Keep the patient warm, and give 0.5 gm. of nikethamide intramuscularly if the circulation is failing. Send the patient to hospital as soon as possible. External burns should be well washed with soap and water (acid) or diluted vinegar (alkali), and dressed with weak solution of bicarbonate (acid) or saline (alkali), and the patient transferred to hospital for further treatment.



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Ferric Potassium Tartrate

Ferric Quinine Citrate B.P.C.

Ferrous Gluconate B.P.C.

Ferrous Lactate

Ferrous Oxalate

Ferrous Sulphate B.P. (*Crystals or Exsiccated*)

Green Ferric Ammonium Citrate B.P.C.

Iron Manganese Peptonate

Iron Peptonate NF (U.S.)

Saccharated Ferrous Carbonate B.P.C.

Saccharated Iron Oxide

Saccharated Iron Phosphate B.P.C. 1949

Soluble Iron Pyrophosphate B.P.C. 1949

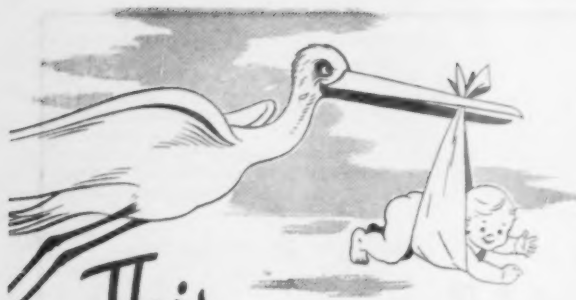
Solution of Ferric Chloride B.P. and B.P.C.

SAMPLES and QUOTATIONS on request to

**EVANS MEDICAL AUSTRALIA (PTY.) LIMITED**

Sydney and Melbourne





## This Bird means business!

Old Doc. Stork takes his job seriously . . . delivering new babies every minute of every day.



**Growing BIGGER and BIGGER every year!**

Our business, too, goes on increasing year after year. For instance, our sales records for the last three years have scored an all-time high . . . and we're still growing.

That's why the partnership of YOU AND JOHNSON'S means business!

And *that* means business, because all babies know that some of the nicest things about this new world of theirs are made by Johnson's: Baby Powder, Cream, Oil, Soap . . . all so comfort-giving, so happy-making. No wonder they sell fast and continuously!

Get YOUR full share of this growing business, too! Display all your Johnson's Baby Products together, because that's how they work best and sell most rapidly.



# Johnson's BABY PRODUCTS



## There's gaiety

in our  
**MERCHANDISING**  
and  
**ADVERTISING!**



Look for  
the colourful candy stripes!

# TEXCEL

See Johnson's sparkling new TEXCEL cellulose tape in the gayest, brightest dispenser. The colourful elephant and candy stripes is the theme of half-page colour advertisements to appear regularly in the Women's Weekly, Woman's Day and Woman Magazines. This is supported by equally colourful dispensers, display boxes, packing material, showcards and hanging cards.

Brighten up your sales with this bright new product of Johnson & Johnson.



To prevent subsequent infection an injection of 300,000 units of procaine benzylpenicillin with 100,000 units of benzylpenicillin may be given.

**Oxalic acid and oxalate.**—If vomiting is delayed, wash out the stomach with a pint of lime water diluted with an equal volume of water, leaving the last half pint in the stomach. If a washout is not undertaken, give four fl. oz. by mouth. If chalk is more readily available, give a teaspoonful stirred up in milk and repeat the dose three or four times. Respiratory or circulatory failure may require the injection of leptaazol 100 mgm., with or without the administration of oxygen.

**Formalin.**—The stomach should be washed out with a solution of a teaspoonful of baking soda to a pint of water, otherwise sodium bicarbonate should be given by mouth in warm water. Respiratory distress may require oxygen.

**Ferrous sulphate.**—The patient is usually a child. Hold the child upside down and tickle the fauces to promote vomiting. If gastric lavage is undertaken use a teaspoonful of sodium bicarbonate to a pint of water and leave 100 to 250 mls in the stomach. Guard against inhalation of vomitus, apply warmth, send the patient to hospital.

**Lime burn of the eye.**—Immediate treatment consists in vigorous washing with water poured from a jug, kettle or tap. Continue washing for half an hour. Anaesthetise the eye with cocaine and remove adherent particles. Particularly effective in removing lime from the cornea is a freshly-made solution of 2 oz. of ammonium tartrate in one pint of distilled water. When the eye has been cleaned, instil homatropine eye-drops, followed in a few minutes with liquid paraffin, cover the eye with a pad, and send the patient to an ophthalmic centre.—Pharm. J., April 30, 1955.

## POISONOUS SUBSTANCES

The Registrar-General's Review for England, 1952, records the following cases of poisoning:—

From aspirin . . . . .	222
From paraldehyde . . . . .	10
From ferrous sulphate . . . . .	8
From methyl salicylate . . . . .	4
From camphor . . . . .	2
From alcohol . . . . .	4
From French polish . . . . .	1

## EVALUATING ENTERIC COATINGS

A method of testing enteric coatings based on enzymatic disintegration in the gastro-intestinal tract of the white rat has been devised by F. C. Hammerness and C. H. Walden, School of Pharmacy, Montana State University (J. Amer. Pharm. Assoc., 1954, 43 (6), 357-8). Pills containing a dye were given to a group of rats, and the time between ingestion and detection of the dye in the urine was noted. After three days, enteric coated pills containing the dye were administered and the time between ingestion and detection of the dye in the urine again noted. If either the dye was not detected or the elapsed time was comparable to the blank, the coating was considered unsatisfactory. The coating was considered satisfactory if the dye was noted after a reasonably increased lapsed time. The coatings used were cellulose acetate hydrogen phthalate and cellulose acetate stearate. The dye used was Pyridium.—"Manufacturing Chemist," April, 1955.

## SCIENTIFIC APPROACH TO CANCER

The March issue of the Practitioner is devoted mainly to the cancer problem, and besides an article on "Our Present Understanding of the Cancer Cell" by Professor A. Haddow, there are review articles on the place of surgery (H. Atkins), radiotherapy (A. P. Wood and R. Morrison), chemotherapy (Edith Paterson), endocrinology

(B. J. Kennedy) in treatment, and, because of its current high incidence, an article (Sir Clement Price Thomas) devoted to carcinoma of the lung. All these summarise the present position very clearly, and it is noteworthy that all the authors foresee the eventual therapeutic solution in some form of chemotherapy. Professor Haddow's summary of some of the fundamental experimental work is likely to be of interest to many readers of "Nature," and it can be heartily recommended as giving in small compass an excellent idea of the main scientific approaches to the problem. It shows how we are beginning to regard the first ("initiation") stage of chemical carcinogenesis as being a combination of the chemical or its metabolites with one or more specific tissue constituents, and the second ("promoting") stage as one of continued proliferation or delayed maturation of the "initiated" cells, with the final stage (neoplasia) emerging after protein deletion. One current view is that the cancer cell is such because it has lost key proteins essential for the control of growth. With the plethora of facts, attempts to arrive at a unifying hypothesis showing how the diverse and very numerous "initiating" agents all have the same end result is becoming essential. What is the common factor in carcinogenesis induced by aromatic amines, polycyclic hydrocarbons, ionising radiations, viruses, hormones and even prolonged tissue culture of some normal cells? This article adequately condenses much of the main evidence which has to be embraced in such a hypothesis. Attention is directed to the recrudescence of interest in tumour immunology, though without discussion. The present writer believes that future articles of this type will perforce discuss this subject more and more, for he has himself recently put forward evidence which supports Professor Haddow's evaluation of its being "the most logical of all approaches." — "Nature," March 26, 1955.

## RADIOIODINATED HUMAN SERUM ALBUMIN

The Radiochemical Centre (White Lion Road, Amersham, Bucks.) can now supply human serum albumin which has been iodinated with radioactive iodine-131 to hospitals and research institutions in the United Kingdom in the same way as it supplies iodine-131. The product (Code No. 1B.17) is in an isotonic saline solution (pH 9.0-9.2), which is sterile and free from pyrogens, and is packed in 10-ml. rubber-capped multi-dose bottles. The specific gravity is not less than 5 mc./mgm. albumin, and the minimum concentration is 100 mc./ml. solution. The protein is iodinated uniformly, and the amount of iodine present is less than 0.2 per cent. of the weight of albumin. The active iodine is firmly bound to the protein molecules, and not more than two per cent. of the total activity is in the form of free iodine at the time of dispatch. Particular care is taken to avoid denaturation, and the product cannot be distinguished from the original albumin by electrophoresis. The product is supplied in standard packages containing either 0.2 mc. (£3) or 1.0 mc. (£5), larger quantities up to 5 mc. being available by arrangement (£5 per mc.).—"Nature," March 26, 1955.

## INSULINASE AND DIABETES

Manufacturing Chemist, January, 1955, states that a new clue to the underlying cause of diabetes was reported at the 126th national meeting of the American Chemical Society. According to Dr. A. I. Mirsky, professor and chairman of the department of clinical science at the University of Pittsburgh School of Medicine, there is a substance produced in the liver which specifically destroys insulin. The activity of this substance, named insulinase, has been demonstrated in the

laboratory by combining insulin with extracts, slices or ground-up portions of liver, he stated, and its mode of action has been established by the use of insulin tagged with radioactive iodine.

"Any condition which will produce an increase in the activity of insulinase in the individual will result in an insulin insufficiency and the consequent development of diabetes mellitus," observed Dr. Mirsky. "Studies are now in progress to determine whether factors which inhibit the action of insulinase will also influence the course of diabetes mellitus in man." He thinks that diabetes, which occurs in approximately 1,600,000 persons in the U.S., appears to be more frequently associated with an increase in insulin requirements than solely with a deficiency in bodily insulin production. Excessive amounts of such hormones as ACTH and cortisone may increase the insulin requirements, but the symptoms in such cases differ from those that appear in diabetics.

The specificity of the enzymes responsible for insulin degradation was established by comparison of the effect of liver extracts on iodine-131 labelled insulin with that on iodine-131 labelled human serum albumin, chymotrypsin, ribonuclease, and other proteins.

## THE CARLSBERG AND WELLCOME FOUNDATIONS

On April 4, 1955, Apothecaries Hall, London, was the scene of a novel international occasion, when the Wellcome Trustees and the directors of the Wellcome Foundation Ltd. entertained to dinner the members of the Carlsberg Foundation and management of the Carlsberg Breweries of Copenhagen.

These two institutions are for all practical purposes identical in their constitution and aims, and also unique in the realm of commercial organisation. Both were created with the object of using for philanthropic purposes the whole of the profits from a continuing industrial concern.

The Carlsberg Foundation is the senior and came into being in the 1880's following the founding of the Carlsberg Breweries by the late J. C. Jacobsen and their extension by his son. These two men left the ownership of their breweries to an independent foundation consisting of five eminent Danish citizens appointed by the Royal Danish Academy of Arts and Sciences. It is the responsibility of these five men to organise and apply the money they received from ownership of the breweries for scientific research and the promotion of the arts, for the benefit of the Danish nation.

It may well be that the Carlsberg Foundation provided the inspiration and the model for the creation of the Wellcome Trustees. When Sir Henry Wellcome died in 1936 he vested the holding of the whole of the share capital of his extensive industrial interests in five trustees.

The similarity between the two Foundations has led them of recent years to make contacts for the discussion of matters common to their experience and interests. It was to cement the friendly relations between the two that the dinner was held.

Sir Henry Dale, O.M., F.R.S., Chairman of the Wellcome Trustees, presided.—"Manufacturing Chemist," April, 1955.

## POSSIBLE COMPETITOR FOR ASPIRIN

By H. S. Grainger, F.P.S.

It is now a good many years since the German chemists introduced aspirin for use in medicine. It has become the standard domestic analgesic and antipyretic and is to be found in every medicine cabinet in the land. Recent news suggests that it may now have a serious competitor. Cheshire et al. have described the preparation and pharmacological properties of

4-hydroxyisophthalic acid. This compound occurs in the brown dust residues in the Kolbe-Schmitt synthesis of salicylic acid, of which it forms some 50 per cent., and it is with material from this source that the present work was carried out. The analgesic properties of the compound were compared with those of aspirin, codeine or other phthalic acid derivatives given intraperitoneally in rats and using as the pain stimulus pressure applied to the tail of the rat until a squeak was elicited. It was shown that the compound has a median effective dose of 303 mgm./Kgm., which is approximately four per cent. of the activity of codeine. The median lethal dose (MLD) in young rats was 1,071 mgm./Kgm.; 600 mgm./Kgm. was well tolerated. The workers showed that 4-hydroxyisophthalic acid has greater activity and a lower toxicity than aspirin. The antipyretic action of the compound was tested to rats rendered pyretic by the administration of pyrogen from *Proteus vulgaris*. Its activity was equal to that of aspirin. The drug is mainly eliminated unchanged in the urine and may be detected by the red colour given on combination with ferric nitrate.—"Export Review," March, 1955.

## GENERAL MEDICAL COUNCIL

### Approved Names

Approved Names are devised or selected by the British Pharmacopoeia Commission, and the intention is that if any of the drugs to which these Approved Names are applied should eventually be described in the British Pharmacopoeia the Approved Name should be its official title.

The issue of an Approved Name does not imply that the substance will necessarily be included in the British Pharmacopoeia or that the Commission is prepared to recommend the use of the substance in medicine.

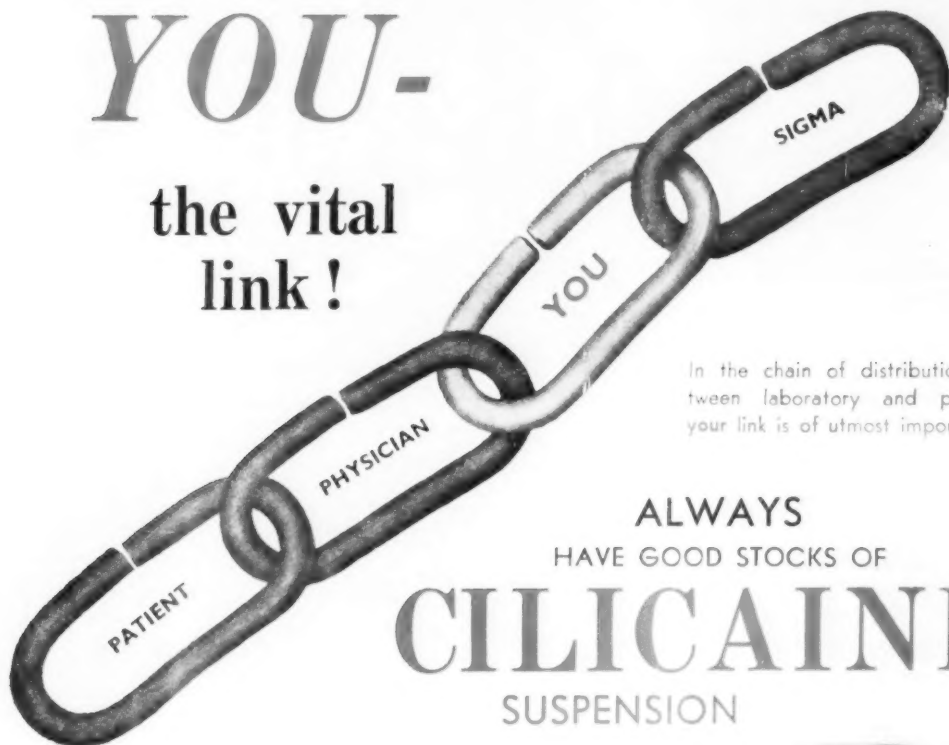
### Supplementary List, May, 1955

Approved Name	Other Names
Chlorhexidine . . . . .	Bis-p-chlorophenyldiguanidohexane Hibitane.
*Diethylthiambutene . . . . .	3-Diethylamino-1:1-di-2'-thienylbut-1-ene, Themalon
*Dimethylthiambutene . . . . .	3-Dimethylamino-1:1-di-2'-thienylbut-1-ene.
*Ethylmethylthiambutene . . . . .	3-Ethylmethylamino-1:1-di-2'-thienylbut-1-ene.
Methyl Phenidate . . . . .	Methyl 1-phenyl-2-piperidylacetate.
**Phenindione . . . . .	Ritalin is the hydrochloride. 2-Phenylindane-1:3-dione. Phenylindanedione. Dindevan.
Polymyxin . . . . .	Antimicrobial substances produced by <i>Bacillus polymyxa</i> . (Specific substances are designated by a terminal letter; thus, Polymyxin E.)
Streptonicozid . . . . .	A compound formed by interaction of a suitable streptomycin salt and isoniazid.
Tripolidine . . . . .	Streptohydrazid. trans-1-2'-Pyridyl-3-pyrrolidino-1-p-tolylprop-1-ene. Actidil is the hydrochloride.
*Not intended for use in human medicine; diethylthiambutene is of interest in veterinary medicine.	
**Replaces Phenylindanedione as the Approved Name.	

Communications relating to Approved Names should be addressed to the Secretary, British Pharmacopoeia Commission, General Medical Council Office, 44, Hallam street, London, W.1.

# YOU-

## the vital link!



In the chain of distribution between laboratory and patient, your link is of utmost importance.

### ALWAYS HAVE GOOD STOCKS OF **CILICAINE** SUSPENSION

The original Australian Aqueous Procaine Penicillin Suspension, CILICAINE SUSPENSION is now first favourite with the medical profession.  
900,000 unit and 1,500,000 unit vials.  
Ready for immediate use.

#### CILICAINE SIMPLEX.

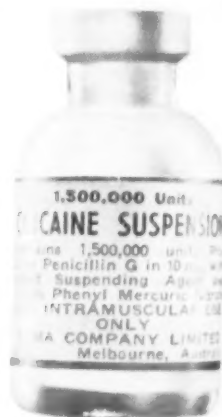
By adding water, Cilicaine Simplex produces a suspension for immediate use.  
Packaged dry, 300,000 unit, 900,000 unit and 1,500,000 unit vials.

#### CILICAINE FORTIFIED.

Procaine Penicillin plus soluble Penicillin.  
Provides high initial blood levels with lower sustained levels (up to 24 hours).  
Packaged dry, 400,000-unit, 1,200,000-unit vials.

**REMEMBER:** The Cilicaines are especially important to you as a Pharmacist, because:

- (a) They are packaged and marketed by SIGMA, a chemist-owned company.
  - (b) To reach the patient, Cilicaine must pass through your hands.
- Cilicaines are often needed for urgent administration; therefore be prepared for prescriptions. Review your stocks now.



From the Penicillin Laboratories of



**SIGMA CO. LTD., MELBOURNE**

Interstate Distributors:

The Wholesale Drug Co. Ltd., Sydney.  
Queensland Druggists Ltd., Brisbane.

Southern Drug Co. Ltd., Adelaide.  
Rumbles Ltd., Perth.

S.C.5.2

*For Post-Operative Convalescence*

# BITONE B

*Distinctively-coloured tablets containing:*

aneurine HCl	1 mg.
riboflavine	0.9 mg.
nicotinamide	10 mg.
pyridoxine HCl	0.125 mg.
caffeine	1 gr.
calc. gluconate	3 gr.
ferrous sulphate	1½ gr.
phenobarbitone	¼ gr.

*Suggested adult dose:*

**One tablet thrice daily**

Bottles of 100, 500.

*provides the average daily requirement of*

## VITAMIN B COMPLEX

(aneurine HCl, riboflavine, nicotinamide and pyridoxine) and

## MINERALS

(iron and calcium) PLUS

## MILD STIMULATION

(caffeine) and

## SEDATION

(phenobarbitone)

*Also now available*

BITONE FORT, which contains in each fluid ounce: aneurine HCl 4 mg., riboflavine 3.6 mg., niacinamide 40 mg., pyridoxine HCl 0.5 mg., caffeine 2-2/3 gr., strychnine 1/32 gr., calc. gluconate 10 gr., ferrous lactate 3½ gr.

It has an unusually pleasant, slightly bitter flavour and is available in bottles of 8 fl. oz.

## Bonus offer from 1st June to 30th July, 1955

D.H.A. Bitone B Tabs. 100—supply 12, charge 11/12 dozen

D.H.A. Bitone B Tabs. 500—supply 12, charge 11/12 dozen

D.H.A. Bitone 8 oz.—supply 36, charge 2¾ dozen

D.H.A. Bitone c Phenobarb. 6 oz.—supply 36, charge 2¾ dozen

D.H.A. Bitone Fort 8 oz.—supply 36, charge 2¾ dozen

*Distributed throughout Australia by*

ALL **D.H.A.** HOUSES

## DISPENSING PROBLEMS

### Two Incompatibilities of Lugol's Solution

#### Solution

Having struck a dispensing problem, I wonder if you could tell me what has happened.

(a) R

Sod. Phenobarbiton  $\frac{1}{2}$  gr.  
Sol. Lugol . . . . . 2 m.  
Syrup. ad. . . . . 60 m.

This mixed easily, and I added Sp. Trag. to make sure the Phenobarb. stayed up. After a few hours this turned completely clear without any trace of brown colour or precipitation.

(b) R

Sod. Phenobarbiton  $\frac{1}{2}$  gr.  
Sol. Lugol . . . . . 2 m.  
Tinct. Aurant. . . . . 5 m.  
Aq. ad. . . . . 60 m.

After a few hours this turned opaque with slight clear crystallisation.

What was the reaction in both cases?  
—D.T.W. (Vic.).

Miss E. M. Witt, of the Victorian College of Pharmacy, has investigated the behaviour of Sodium Phenobarbitone and Lugol's Solution in aqueous mixtures with Syrup and with Tincture of Orange, in order to provide an answer to this query. Miss Witt reports as follows:—

Mixture A.	Mixture B.
Sod. Phenobarbiton $\frac{1}{2}$ gr.	Sod. Phenobarbiton $\frac{1}{2}$ gr.
Sol. Lugol. . . . . 2 m.	Sol. Lugol. . . . . 2 m.
Syr. ad. . . . . 60 m.	Tinct. Aurant. . . . . 5 m.
	Aq. ad. . . . . 60 m.

"In both mixtures decolourisation and precipitation occurs due primarily to the hydrolysis of the Sodium Phenobarbitone with the liberation of Sodium Hydroxide and Phenobarbitone.

In Mixture A the Sodium Hydroxide probably reacts with the free Iodine in the Lugol's Solution to form a mixture of Sodium Iodide and Sodium Hypoiodite, the latter being reduced by the Syrup to give a colourless mixture.

In Mixture B as in A, Sodium Hypoiodite is formed, and this reacts with the alcohol of the Tincture of Orange to form Iodoform. This reaction may not be observed immediately, but is evident on standing.

In dispensing mixtures as above, an equivalent amount of Phenobarbitone should be substituted for the Sodium Phenobarbitone and suspended by a suitable suspending agent, e.g. Mucilage of Tragacanth. Alternatively, the Lugol's Solution could be dispensed separately."

There are two comments from Miss Witt's report as follows:—

(i) Although our correspondent refers to Mixture A remaining clear without precipitation, a precipitate is formed on standing.

(ii) Although sucrose is classed generally as a non-reducing sugar, it will in fact reduce a number of substances. This is an example.

### Aminacrine Sulphate Incompatibility

Ephedrine Sulphate . . . . . 1 gr.  
Aminacrine Hydrochloride . . . . .  $\frac{1}{2}$  gr.  
Distilled Water . . . . .  $\frac{1}{2}$  fl. oz.

The above prescription was referred to us by a pharmacist. When dispensed as written, a yellow precipitate was obtained. This was shown to contain sulphate ions by testing with barium chloride. A similar precipitate is obtained when aminacrine hydrochloride and sodium sulphate are dispensed together. Therefore the precipitate is aminacrine sulphate, and



this incompatibility may be overcome by the substitution of ephedrine hydrochloride.

—Margaret Simon.

Pharmacy Department, University of Sydney.

### A Difficult Bentonite Cream

R

Liq. Carb. Deterg.  
Sulphur Praecip.  
Acid. Salicyl. aa. . . . . 6%  
Bentonit. . . . . 3%  
Ol. Lavand. . . . . q.s.  
Ol. Oliv.  
Aq. Calcis. aa. . . . . 2 fl. oz.  
Ft. crem.

Sig. Apply to scalp twice daily and wash daily. The following methods were tried unsuccessfully:

(i) Emulsification of oil with lime-water.

(ii) Preparing a bentonite magma with the lime-water.

(iii) Triturating the powders initially with the lime-water.

(iv) Triturating the powders initially with the oil.

Finally, Oleic Acid 15 m. and Adeps Lanae 120 gr. were added and a satisfactory product obtained.

—A.B. (Vic.).

### Extemporaneous Preparation of Limewater

The frequent use of Limewater at the dispensing counter for the preparation of creams is often a difficulty for the practising pharmacist.

Stock solutions, prepared by the B.P. method, have often deteriorated sufficiently in the stock bottle (unless freshly prepared) to cause failure when used for emulsion base creams.

The following method for extemporaneously preparing Limewater should prove of value:—

Sprinkle an excess of Calcium Hydroxide on to a fluted filter paper (about 120 gr. for the average size filter), and through this run distilled water, discarding the first ounce of filtrate.

Assays conducted on ounce quantities, subsequent to the first ounce, have proved to be up to B.P. strength and quite satisfactory.

The results of these assays will be published in the Journal later.

—C.T. (Vic.).

### Unusual Nasal Application

The following was received:—

Cocain. Alk. . . . . 1 gr.  
Excipient . . . . . q.s.  
Ft. cachet . . . . . mitte 12

Sig. Apply to each nostril for ten minutes each hour and then remove.

Subsequent enquiries disclosed an unusual requirement which, in its final form, differed considerably from the original order.

The preparation agreed on with the prescriber was as follows:—

Cocain. Hydrochlor. . . . . 1 gr.  
Amylum. . . . . ad 10 gr.

Sig. Apply on a swab wrapped with cotton wool and dipped in Liq. Adrenalin, and then on the powder. After applying to each nostril for ten minutes, then remove.

—L.F.E. (Vic.).





# Prescription Proprieties and New Drugs

By Geoff K. Treleaven, Ph.C., F.P.S., of the Pharmaceuticals Department, Victorian College of Pharmacy.

## Proprietary Index for Use with P.B. List, 1955-56

(As June 1, 1955)

Alterations and additions should be made from time to time as amendments appear.

**Proprietary Names only** for items listed are included except where the item itself is also the proprietary name. **For other manufacturers of similar products** the P.B. List should be consulted.

### FIRST SCHEDULE

Item No.	Benefit	Proprietary Names (Refer P.B. List for Other Manufacturers)
1.	Acetarsol Soluble Injection	Acetylarsan (M&B).
5.	Aloxidone	Malidone (B. Schering).
6.	Amidone	Adanon (Bayer); Synthanal (McDonald); Physeptone (B.W.); Methadon (Stearns).
6A.	Amodiaquine	Camoquin (P.D.'s).
10.	Antazoline Injection	Antistine (Ciba); Histostab (Boots).
12.	Aurothioglucose Oily Injection	Solganol B-Oleosum (Schering).
13.	Benzhexol Hydrochloride	Artane (Lederle); Pipanol (Stearns).
14.	Bismuth Aqueous Injection	Bismostab (Boots); Bismuth Metal (B.W.).
15.	Bismuth Oxychloride Aqueous Injection	Bisoxyl (B.D.H.); Bisvene (Evans).
16.	Bismuth Oxychloride Oily Injection	Bismol (D.H.A.).
17.	Bismuth Salicylate Oily Injection	Bisalevan (Evans).
18.	Calcium Aurothiomalate Injection	Auro-Calcium (Crookes).
23.	Carbachol	Moryl (Savory & Moore).
24.	Carbarsone	Leucarsone (M&B).
24A.	Carbimazole	Neo-Mercazole (B. Schering).
26.	Chiniofon	Yatren (Bayer).
27.	Chloroquine	Nivaquine (M&B); Aralen (Bayer).
29.	Dapsone	D.A.D.P.S. (Andrews); Avlosulfon (I.C.I.).
30A.	Desacetyl Lanatoside C	Cedilanid (Sandoz).
34.	Diasone	Diamidin (P.D.).
35.	Dicoumarol	Dicoumarin (Organon).
36.	Diethazine Hydrochloride	Diparcol (M&B).
37.	Diethylcarbamazine	Ethodryl (B.D.H.); Banocide (B.W.); Hetrazan (Lederle).
40.	Digitoxin	Digicristin (McDonald); Crystodigin (Lilly); Cardigen (P.D.); Purodigin (Wyeth); Digitaline (Nativelle).
42.	Dihydroergotamine Injection	D.H.E. 45 (Sandoz).
43.	Dihydromorphinone	Dilaudid (Knoll); Lucodan (Knoll).
44.	Diiodohydroxyquinoline	Savorquin (Savory & Moore); Embequin (M&B).
45.	Dimercaprol Injection	B.A.L. (Boots).
46.	Diphenhydramine Hydrochloride Injection	Benadryl (P.D.).
50.	Diphtheria Pertussis and Tetanus Antigen	Triple Antigen (C.S.L.); Trinavac (Sharp & Dohme); Triogen (P.D.); DTPP (B.W.).
59.	Ergometrine Maleate	Ergotrate (Lilly).
60.	Ergot (Prepared)	Palatinoid (Oppenheimer).
61.	Ergotamine Tartrate	Gynergen (Sandoz).
63.	Ethopropazine Hydrochloride	Lysivane (M&B).
64.	Ethyl Biscoumacetate	Trombolsan (Geigy).
65.	Ethylidene Dicoumarin	E.D.C. (Nicholas).
72.	Glyceryl Trinitrate	Anginine Stabilised (B.W.); Vasitrin (D.H.A.).
75.	Heparin Injection	Liquemin (Roche); Pularin (Evans).
80A.	Hexamethonium Bromide	Vegolysen (M&B).
80B.	Hexamethonium Bromide Retard	Vegolysen Retard (M&B).
80C.	Hexamethonium Tartrate Injection	Vegolysen T (M&B).
83.	Insulin Injection	Berna (Sera).
86.	Insulin Isophane Injection (N.P.H.)	Leo (Nordisk); Neutral Protamine Insulin (C.S.L.).
88.	Insulin Protamine Zinc Injection	Berna (Sera).
89.	Isoprenaline Hydrochloride	Isuprel (Stearns).
90.	Isoprenaline Sulphate	Neo-Epinine (B.W.).
93.	Leptazol Injection	Cardiazol (Carzoline) (Knolls); Phrenazol (Boots).
95.	Liver Extract Injection	Hepa-B-Plex "5" (Prosana).



**A  
NEW**

**EFFECTIVE  
TREATMENT FOR  
ANXIETY STATES**

Each Tablet contains:—

<b>DEXAMPHETAMINE SULPHATE</b>	<b>2.5 mg</b>
<b>CYCLOBARBITONE</b>	<b>35 mg</b>
<b>MEPHENESIN</b>	<b>120 mg</b>

Anxine Tablets provide comprehensive symptomatic treatment of anxiety states, psychoneuroses and psychosomatic disorders

by improving mood and increasing confidence,

by inducing gentle sedation and allaying anxiety  
and

by securing the optimal degree of muscular relaxation.

*Formula*

Each Anxine Tablet  
contains:—

Dexamphetamine  
sulphate 2.5 mg.  
Cyclobarbitone 35 mg.  
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102.	Mersalyl Injection .. .. .	Salyrgan (Bayer).
103.	Methionine .. .. .	Methnine (Medical Research); Meonine (Wyeth).
104.	Methoin .. .. .	Mesantoin (Sandoz).
105.	Methyl Atropine Nitrate .. .. .	Eumydrin (Bayer).
105A.	Methylergometrine Tartrate .. .. .	Methergin (Sandoz).
110.	Neosarsphenamine Injection .. .. .	Novarsenobillon (N.A.B.) (M&B); Evarsan (Evans); Neoici (Gamma).
112.	Neostigmine Bromide .. .. .	Prostigmin (Roche).
113.	Neostigmine Methylsulphate Injection .. .. .	Prostigmin (Roche).
114.	Nikethamide Injection .. .. .	Coramine (Ciba); Corvotone (Boots); Anacardone (B.D.H.); Nicamide (B.W.).
114A.	Noradrenaline .. .. .	Levophed (Stearns).
115.	Nucleotides Injection .. .. .	Pentide (A&H); Pentnucleotide (Menley & James); S.P.N. (Evans).
117.	Oxophenarsine Hydrochloride Injection .. .. .	Mapharsen (Parke Davis).
118.	Oxytocin Injection .. .. .	Pitocin (P.D.).
119.	Pamaquin .. .. .	Plasmoquine (Bayer).
120.	Papaveretum .. .. .	Omnopon (Roche).
120A.	Papaveretum with Hyoscine Hydrobromide .. .. .	Omnopon-Scopolamine (Roche).
122.	Paramethadione .. .. .	Paradione (Abbotts).
122A.	Parathyroid Extract .. .. .	Paroidin (P.D.).
124.	Penethamate Hydriodide .. .. .	Estopen (Glaxo).
126.	Penicillin Procaine Aqueous Suspension .. .. .	Aquacillin (Fauldings); Cilicaine Suspension (Sigma); Megacillin (Fauldings); Distaquaine Suspension (Evans); Mylipen (Glaxo); Procillin A.S. (D.H.A.); Procillin Injecs A.S. (D.H.A.); Prostabillin A.S. (Boots).
127.	Penicillin, Procaine (Crystalline), Injection .. .. .	Avloprocil N.A. (I.C.I.); Pro-Stabillin (Boots); Seclophen (Glaxo); Penaquacaine G (C.S.L.); Penaquacaine Fort (C.S.L.); Procillin Dry & Fort (D.H.A.); Cilicaine Fort & Simplex (Sigma); Bi-Stabillin (Boots); Distaquaine G (Evans); Distaquaine & Fort (M&B).
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128AA.	Pentaerythritol Tetranitrate .. .. .	Peritrate (Warner); Mycardol (Stearns).
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128B.	Pentolinium Tartrate Retard .. .. .	Ansolsen Retard (M&B).
132.	Pertussis (Phase 1) Vaccine .. .. .	Petein (Schering).
133.	Pethidine Hydrochloride .. .. .	Pethanal (McDonald); Demerol (Bayer); Mephobarbital (Anglo-Swiss).
135.	Pemitone .. .. .	Prominal (Bayer); Promiton (Knoll Labs.).
136.	Phenadoxone Hydrochloride .. .. .	Heptalgin (Glaxo).
137.	Phenobarbitone Sodium Injection .. .. .	Cemalonal (McDonald); Gardenal Sodium (M&B).
138.	Phenylindanedione .. .. .	Indevan (Evans); Indema (I.C.I.).
139.	Phenytoin Sodium .. .. .	Dilantin (P.D.); Eptoin (Boots); Detoin (Knoll Labs.).
140.	Phthalylsulphacetamide .. .. .	Enterocid (B. Schering); Cetasulph (McDonald); Talecid (Schering); Thalacet (Virax).
141.	Phthalylsulphathiazole .. .. .	Thalazole (M&B); Sulfathalidine (Sharp & Dohme).
145.	Pituitary (Posterior Lobe) Obstetrical Injection .. .. .	Infundin Pituitary (B.W.); Pituitrin Obstetrical (P.D.).
146.	Primidone .. .. .	Mysoline (I.C.I.).
148.	Procyclidine Hydrochloride .. .. .	Kemadrin (B.W.).
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150.	Promethazine Hydrochloride Injection .. .. .	Phenergan (M&B).
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166.	Sulphacetamide .. .. .	Solutox (Fawns & McA.); Acetocid (B. Schering); Albucid (Schering).
167.	Sulphadiazine .. .. .	Infatabs (P.D.'s); Sulphadiazinettes (Knoll Labs.); Sulazine (Schering).
168.	Sulphadimidine .. .. .	Sulphamezathine (I.C.I.); Dimidi-Sulph (Virax).
169.	Sulphafurazole .. .. .	Gantrisin (Roche).
170.	Sulphaguanidine .. .. .	Guanaflex (McDonalds).
172.	Sulphamethizole .. .. .	Urolucosil (Warners).
173.	Sulphapyridine .. .. .	M&B 693 (M&B).
174.	Sulpharsphenamine Injection .. .. .	Sulpharsan (Evans).
175.	Sulphathiazole .. .. .	Thiazamide (M&B).
176.	Sulphonamides, Mixed (A), Two Sulphonamides .. .. .	Dimerzine (D.H.A.); Disulphettes (Harvey); Disulpha (Top-pin); Duozine (Abbott); Dimerazole (Virax); Meradiazine (Harvey); Sulphaduo (Knoll Labs.); Two Sulphas (Medical Research).

**Item No.      Benefit**

177. Sulphonamides, Mixed (B), Three Sulphonamides
178. Sulphonamides, Mixed (C), Four Sulphonamides
179. Suprarenal Cortex Extract, Injection
183. Theophylline with Ethylene-diamine (Aminophylline)
184. Thiacetazone
189. Triethanolamine Trinitrate
190. Troxidone
191. Vasopressin Injection
192. Vitamin K Aqueous Injection
193. Vitamin K Oily Injection (Menaphthone)
194. Vitamin K (Oral)

**Proprietary Names (Refer P.B. List for Other Manufacturers)**

- Sulphaco & Mitis (McDonald); Sulphatriad (May & Baker); Triazol (Abbott); Trizettes (Toppin); Triple Sulphonamides (Fauldings); Sulphadital (Fawns & McA.); Sulphacomound Tres (Knoll Labs.); Sulphonamix (Sigma); Three Sulphas (Adca); Triple Sulpha (Toppin); Trisulfa (Andrews); Trisulfettes (Andrews).
- Multisulpha (Knoll Labs.); Multisulphettes (Knoll Labs.).
- Eschatin (P.D.); Eucortone (A&H).
- Cardophylline (Hamiltons); Diurophylin (McDonald); Carine (Knoll Labs.); Glucophylline (Abbott).
- Neustab (Boots); Tibizone (Andrews); Seroden (A&H); Thioparamizone (Herts).
- Praenitron (Schering).
- Tridione (Abbotts); Tridione Dulcets (Abbotts).
- Pitressin (P.D.); Pituitary Surgical (C.S.L.); Pituitrin Surgical (P.D.).
- Hykinone (Abbotts); Kapilin (Glaxo); Davitamon K (Organon); Kavatine (Knoll Labs.); K-Thrombin Aqueous (Fawns & McA.); Synkavit (Roche).
- Prokayvit (B.D.H.); Vitavel K (Vitamins); Kavatine (Knoll Labs.).
- Kappaxan (Bayer); Synkamine (P.D.); Hykinone (Abbott); Kayvite (Sigma); Synkavit (Roche); Kapilin (Glaxo); Kavatine (Knoll Labs.); K-Thrombin (Fawns & McA.); Prokayvit (B.D.H.).

**SECOND SCHEDULE (RESTRICTED DRUGS)****Item No.****Benefit****Proprietary Names (Refer P.B. List for Other Manufacturers)**

- 1A. Aureomycin Granules
2. Calcium Paraminosalicylate
3. Caramiphen Hydrochloride
4. Chloramphenicol
5. Chloramphenicol Palmitate
6. Cortisone Acetate
- 6A. Cyanocobalamin (Vit. B<sub>12</sub>)
7. Deoxycortone Acetate Aqueous Injection
8. Deoxycortone Acetate Aqueous Suspension
9. Deoxycortone Acetate Oily Injection
11. Dihydro Streptomycin
12. Folic Acid
13. Isoniazid
- 13A. Methorphan
- 13B. Oxytetracycline
- 13C. Oxytetracycline Oral Suspension
14. Pancreatin
16. Phenindamine Tartrate
17. Progesterone Injection (Progestin)
22. Sodium Para-Aminosalicylate
24. Streptomycin
- 24A. Streptomycin Sulphate Intrathecal Injection
25. Streptomycin Sulphate, Solution for Injection
28. Testosterone
29. Testosterone Methyl
30. Testosterone Oenanthate Injection
31. Testosterone Phenyl Propionate Injection
32. Testosterone Propionate Injection
33. Tetracycline
34. Tetracycline Granules
35. Tetracycline Paediatric Drops

- Aureomycin Spersoids (Lederle).
- Aminacyl (Wander); Calcipas (Knoll Labs.); Aminacyl Granulate (Wanders).
- Parpanit (Geigy).
- Chloromycetin (P.D.).
- Chloromycetin Palmitate (P.D.).
- Cortic (Adca); Cortadren (Schering); Cortone (Merck); Scheroson (Schering).
- Anacobin (B.D.H.); Heptamin (Sigma); Benol (Knoll Labs.); Benol Forte (Knoll Labs.); Benol 1000 (Knoll Labs.); Intravite B<sub>12</sub> (Nicholas); Megalovel (Vitamins); Cobastab Viules (Boots); Cytobex (P.D.); Vibion & Vibion Forte (Andrews); Cytamen (Glaxo); Euhaemon (A&H); Parentosol B<sub>12</sub> (McDonald); Distivit (I.C.I., Evans, B.W.'s).
- Percorten (water soluble) (Ciba); Primocort (I.V.) (Schering).
- Percorten Crystule (Ciba).
- D.O.C.A. (Organon); Percorten (Ciba); Primocort (Schering).
- Pasing (Caminer); Specia Didromycine (SP).
- Folvite (Lederle).
- Ertuban (Schering); Isozide (Nicholas); Isotiny (Knoll Labs.); Rimifon (Roche); Andrazide (Andrews); Pycazide (Herts); Tebos (Harvey).
- Dromoran (Roche).
- Terramycin (Pfizer).
- Terramycin Oral Suspension (Pfizer).
- Pantheric (P.D.); Palatinoid (Oppenheimer).
- Thephorin (Roche).
- Progestin (B.D.H.); Progestin (Organon); Proluton (Schering); Lutocyclin (Ciba).
- Aminacyl (Wanders); Parmisan Sod. (Herts); Parasal Sod. (McDonalds); Osacyl (Ciba); Pasan (Knoll Labs.).
- Pasing (Caminer); Specia (SP).
- Streptomycin Intrathecal (Evans).
- Streptaquine (A&H, B.W., Evans).
- Testoviron (Schering); Perandren (Ciba).
- Perandren (Ciba); Testoviron (Schering); Oraviron (B. Schering); Metestine (Knoll Labs.); Neo-Hombreol (Organon).
- Primoteston Depot (Schering).
- T.P.P. (Organon).
- Neo-Hombreol (Organon); Perandren (Ciba); Testoviron (Schering); Intraviron (B. Schering); Testine (Knoll Labs.); Testogenine (Fawns & McA.).
- Tetracycline (Pfizer); Achromycin (Lederle); Steclin (Squibb).
- Achromycin Spersoids (Lederle).
- Steclin (Squibb).





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# Pharmacology for Pharmacy

By F. H. Shaw, M.Sc., Ph.D.(Lond.), Professor of Pharmacology, University of Melbourne.

## Fourth Article

### Physiological Pharmacology II

**Adrenaline.** The story of adrenaline and noradrenaline is a tale extending over half a century. From the point of view of the pharmacologist, it is not a very creditable one. The tardy revelation of its Coda is not very flattering. Surely one might have expected the discovery of noradrenaline within a shorter period than fifty years.

In 1895 Schaefer and Oliver found that simple extracts of the adrenal glands (glands the size of a pea next the kidneys) injected into the blood stream produced an increase in heart rate and a rise in blood pressure. This experiment was carried out shortly after the discovery of the function of the thyroid gland and after the concept of a ductless (endocrine) gland had been established. When it was shown that stimulation of the nerve (splanchnic) supplying the adrenals resulted in a rise in blood pressure, it was evident that a new hormone (chemical messenger) had been found. The task was completed by the isolation of the active substance by Abel in 1899. The subject remained stagnant for nearly two decades. Movement recommenced when the nature of the transmitter action of acetylcholine was discovered by Loewi (see previous article). It had been obvious for years that the action of adrenaline harmonised with that of the sympathetic nervous system. So it was natural to suggest that adrenaline was the humoral transmitter of the nervous impulses in the post ganglionic sympathetic fibres. These fibres run mainly to the heart and blood vessels, and control our blood pressure, or rather the flow of blood to that part of the body most in need of it, e.g., the muscles during exercise. The sympathetic also controls the blood supply to the brain and the heart itself, that in the coronary circulation. Fibres also run to the eye (dilatation of the pupil), bronchii (relaxation), alimentary canal (inhibition), bladder, etc. Once again, if one wishes to remember easily the actions of adrenaline, one just enumerates the actions of the sympathetic system. There are, however, exceptions which we shall discuss later. In particular, however, adrenaline accelerates the heart, constricts arteries in the skin, brain and abdomen, dilates those in the muscles and heart, dilates the eye (only by injection), stops movement in the alimentary canal, increases the amount of sugar in the blood, dilates the bronchi. There is a definite but ill-defined action of the central nervous system; this may appear as anxiety, apprehension, tremor and headache. These untoward signs may arise from the adrenaline mixed with procaine in a dental local anaesthetic—as you may have noticed for yourself. Larger doses have a further toxic effect, but death from adrenaline is rare or unknown.

Adrenaline may be assayed both chemically and biologically. There is a fluorimetric method which is sensitive to one part in a million. The increase in blood pressure which a known solution of adrenaline produces may be compared with that given by an unknown one. This forms the basis of the biological assay. Several drugs, such as ergotamine, yohimbine and dibenamine, antagonise the actions of adrenaline, and this may serve as a clue to identity. Not all the properties are annulled by these drugs; for instance, the dilation

of certain blood vessels by adrenaline is not affected by the antagonists. Certain actions of adrenaline are synergised by cocaine, but this drug is not the able helpmeet that eserine is to acetylcholine. The fate of adrenaline in the body is undecided. It is known that oxidation by an enzyme, amine oxidase, takes place, but there are other pathways which may also be followed in the body.

Perhaps the reader will have been puzzled by the fact that adrenaline constricts some blood vessels and dilates others. He may be more perplexed when told that as far as the histologist knows there is no difference between the cells which contract and those which relax. How can one drug have opposite actions on the same type of cell? This question and several others which we cannot go into embarrassed pharmacologists for many years. In the attempt to solve the enigma, noradrenaline was discovered.

Noradrenaline occurs in the adrenal together with adrenaline, and is also liberated from certain sympathetic fibres. Yet its presence in the body was not suspected for nearly fifty years. The factor which contributed most to its unveiling was the discovery of a new technique in biochemistry—paper chromatography. That very simple process of separating substances, by means of differential solubility, in an organic solvent, which is allowed to run up (or down) a strip of filter paper.

Noradrenaline has been shown to be liberated at the endings of certain sympathetic fibres, and consequently must be regarded as a humoral transmitter, even though its relationship to adrenaline in this respect is still undetermined. The pharmacological properties of noradrenaline differ from those of adrenaline in so far as the former has not the inhibitory characteristics of the latter, e.g., the intestine, is not relaxed. The new drug has little action on the heart, i.e., cardiac output is not increased, as it is with adrenaline. The main action of this new hormone is to constrict the peripheral blood vessels, and thereby raise the blood pressure.

**Therapeutics.** These two sympathomimetic substances have a useful role to play in medicine. Adrenaline is now used primarily to dilate the bronchial passages in asthma. Prolonged use of strong solutions may result in "adrenaline-fastness," the patient becoming resistant to the antiasthmatic effect. This drug is also of value in allergic and anaphylactic conditions (hay fever, serum sickness). Local application will, of course, prevent capillary bleeding. Spectacular results may be obtained by the direct injection of adrenaline into a heart which has ceased to beat, be the syncope due to surgical or other forms of shock.

Noradrenaline is most usually employed in hypotension (low blood pressure) during or after an operation. It is administered by means of an intravenous drip. In this method a cannula is inserted into a vein, which is connected by a tube to a reservoir containing a glucose (or other nutrient) solution and the drug. The solution flows slowly into the circulation over a

period of hours. The flow of noradrenaline is controlled at such a rate that the blood pressure is maintained at the normal level. It can be said with some justification that this elevation of a depressed circulation is brought about by "normal" means as the liberation of noradrenaline from the suprarenals is a natural bodily process for maintaining the correct blood pressure. This may be compared with the use of methedrine, a synthetic chemical, for the same purpose.

Noradrenaline is also mixed with local anaesthetics to produce vasoconstriction (see later article).

Ephedrine. This compound does not occur naturally in the body, as do the two previously mentioned hormones, but it is a plant product. Ephedrine must be the oldest drug known in medicine. It was known in China 5000 years ago. Its pharmacology was reinvestigated by Chen in 1923. The drug is now produced synthetically. There are six isomers (3 for ephedrine and 3 for pseudoephedrine). In distinction to most optically active substances, there is little pharmacological difference between the d and l forms, so usually the racemate is used.

The change from the phenolic structure of adrenaline to the phenyl results in a marked difference in action. Ephedrine is effective orally, has prolonged action, and stimulates the cortical and medullary regions.

Ephedrine raises the blood pressure, but more slowly than adrenaline, although the effect lasts longer. Repeated injections have less effect, a phenomenon known as tachyphylaxis, which sometimes occurs with other drugs. The arteries are generally constricted. The smooth muscle of the bronchial tree is relaxed, although this may not be complete until one hour after administration. The pupil is dilated (mydriasis). There is a striking disparity between the Caucasians and Chinese or Negroes. Ephedrine is most active in the first, less active in the second, and almost completely inactive in the last. The smooth muscle of the alimentary canal is inhibited, as well as micturition. The central nervous system is stimulated, and this may result in a feeling of anxiety, tremor and insomnia.

Ephedrine is a fairly safe drug. There are no recorded deaths. Most of the side effects are due to its action on the C N S, e.g., nausea, vomiting, tremor and sweating. Whilst harmless, these symptoms may preclude the use of the drug in susceptible patients.

The drug is used therapeutically in bronchial asthma, especially in the mild case, but resistance may develop. Allergic disorders may be relieved, and its decongestive (vasoconstrictor) effect may produce the same result in coryza, sinusitis and hay fever. It is frequently used in spinal anaesthesia to prevent a fall in blood pressure; it is also of value in the treatment of enuresis.

There are other sympathomimetic amines which are used in medicine, but none to the extent of these already mentioned. The use of neosynephrine and methedrine to raise blood pressure is common during and after surgery. Isopropylarterenal is even more potent than adrenaline as a bronchial antispasmodic, and is useful in bronchial asthma where the patient has become "adrenaline fast." Side actions, of cardiac origin, may, however, be severe. The marked cardiac stimulation accompanying a fall in blood pressure produces coronary insufficiency.

The pharmacology and use of the adrenergic blocking agents (adrenalin antagonists) will be discussed in the next article. These compounds have become increasingly numerous in the last few years.

In the preceding article we saw how a knowledge of the pharmacology of the parasympathetic nervous system could help solve certain therapeutic problems. This month a similar demonstration has been given for the sympathetic branch.



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# Pharmacy in Trinidad

We have pleasure in presenting the following article, specially written for the Journal by Winifred Atwell, popular pianist, at present appearing in Australia with the Tivoli Theatres. Miss Atwell qualified as a pharmaceutical chemist in Trinidad.

Being a chemist in Trinidad offers to a dispenser a wide range of experience, due, no doubt, to the very mixed population we have there. The chemist in Trinidad has to be a linguist, a vet, a medico, and also be well versed in an obscure superstition, called "Obeah," as well as dispensing prescriptions and selling drugs.

As mentioned previously, Trinidad has a very mixed population. You can see there every day Chinese, East Indians, Europeans, and South Americans, and, in fact, we sometimes pride ourselves in the thought that Trinidad is perhaps one of the most cosmopolitan little islands in the world. Naturally, language difficulties arise under these circumstances, and I am sure it has often been very amusing to a bystander to hear the linguistic inventions we have to improvise to make ourselves understood. Some of the poorer East Indians (from India, as against natives of the Caribbean, called West Indians) know very little English, even though English is the universal language of the island, and then, sometimes, there are very old people who cling to their patois, a kind of local French dialect which I suppose must date back to the days when Trinidad had a large French population.

Trinidadians love their pets as much as anyone, and though, unfortunately, I do not think we have got to the stage where we have a public dispensary for sick animals, as we have in London, the pharmacist again comes to the rescue with animal cures.

Not the least interesting part of pharmacy in Trinidad is the different potions for which one is asked by superstitious individuals. One sometimes gets a request for commanding oil. It is believed that if a person sprinkles this oil in a certain place he can command the person standing there to do just as he wishes! If I had told the purchasers that such a belief was sheer nonsense, they would have thought me very stupid—and I would have been, too—I would have lost a customer. On these occasions one would give them any impressive looking bland oil, preferably linseed oil, and so part friends with the customer.

"I want some love-drops" is a frequent request from young girls. They believe that if they touch the forehead of their chosen man with love-drops while he is sleeping, he will fall helplessly in love with the first person he sets eyes on when he awakens. The girls make very certain WHO it is he first sees!!!!

Another request is for "confusion powders"—to make people quarrel!

But one of the most surprising demands I ever received from this type of customer was a request for some dead man's blood! The purchaser was supplied with some acetic acid, which was poured into some ammonia, and it foamed up in a magnificent manner, which so impressed the man that he said, in a very awed voice, "That'll be mighty powerful, ma'am!" The last I saw of him he was walking down the street, shaking his head in wonder!

So much for the lighter side of pharmacy in Trinidad.

The chemist shops in Trinidad are similar to the ones here, except that there is no health scheme in Trinidad as you have here. People can, of course, obtain free medicine if they go to the hospital for treatment, but usually they prefer to come to the

chemist and ask him to prescribe treatment for their various ailments.

Our pharmacy in Tunapuna opened at 8 o'clock in the morning and closed at 9 o'clock in the evening. Quite often my father had to get out of bed in the middle of the night to dispense an urgent prescription, but, too, sometimes he was awakened only to find that the prospective customer wanted to purchase a Sedlitz powder or a dose of castor oil.

As with the chemists here, we sold toilet articles and a few toys. But at Christmas we always had Christmas cards in stock—and did a roaring trade.

BUT . . . there is NO under-cutting in prices. A strict price-control system has been set up, and inspectors visit the shops to make sure nobody is breaking the rules.

The course of study to obtain a diploma is, I think, rather more difficult for the student in Trinidad than it is here, as there is no university. This means that chemistry students have to study privately from the set books while attending lectures at the hospital in the Port of Spain. The course takes five years. After three years, the student qualifies as an assistant pharmacist, and two years later may gain the diploma of pharmacy.

I worked in the pharmacy for a number of years, but my first love was always the piano, so I eventually decided that it was time to leave and try my luck in London as a pianist.

Although the work in pharmacy was always interesting, I'm glad I made the grade as a pianist, for I can't stand the smell of iodoform or castor oil.

## NOBEL PRIZE WINNERS TO VISIT AUSTRALIA

Two Nobel prize winners will visit Australia in August as delegates to a conference of the world's foremost wool scientists.

They are Dr. A. J. P. Martin, 45, and Dr. R. L. M. Synge, 40, leading British research scientists in the field of protein chemistry.

Dr. Martin and Dr. Synge are among the 50 overseas scientists who will attend the International Wool Textile Research Conference, which opens in Sydney on August 22.

They were awarded the Nobel prize for chemistry in 1952 for their joint invention of partition chromatography, which revolutionised the chemical analysis of proteins such as wool.

The discovery has received international acclaim, and is regarded as a milestone in the progress of chemistry.

Their method of analysis, originally developed to study wool, is now widely used by other scientists to study vitamins, life-saving drugs (antibiotics), hormones, and even in the development of atomic power.

At the time of the original experiments on partition chromatography, they were working together at the Wool Industries Research Association, Leeds.

In 1950 they were elected to fellowship of The Royal Society—one of science's highest honours—in recognition of their work.

Dr. Martin and Synge will give a number of lectures to the Conference on the most up-to-date developments of their method.

They will also discuss its application to wool research with Australian scientists of the C.S.I.R.O. Wool Textile Research Laboratories.

Dr. Martin, a married man with three children, is now head of the physical chemistry division of the National Institute for Medical Research, London. Dr. Synge, who is married with five children, is a biochemist at the Rowett Research Institute, Scotland, which is noted for its studies of the nutrition of farm animals.

# Civil Defence

## Against What Do We Prepare To Defend Ourselves?

By Alan Brooksbank

(Third article of the series)

In the two preceding articles some duties which pharmacists could do better than members of any other trade, profession or calling were outlined. Their nature is such that pharmacists, particularly in country areas, would have to act on their own initiative and, therefore, require more information for their own safety than members of many other sections of the Civil Defence Organisation.

The full answer to the very first question — Against what do we prepare to defend ourselves? — is very involved. It is not enough for pharmacists to know what weapons can be used and their respective injurious powers; they must also have some appreciation of both the strategy and the tactics of their employment by an enemy.

Such is the immense spread of danger from hydrogen and other thermonuclear missiles which exploit secondary radioactivity that our peril is neither limited to missiles which explode in or over Australia, nor would it cease on the signing of an armistice in a war wherein thermonuclear missiles were exploded in the islands north of Australia.

The hydrogen missile makes it obvious that the old expression "military objective" is now as territorially unlimited as it has been obsolete for a decade to describe strategy and tactics whereby civilians not living near such objectives would be quite safe. Alas! the shocking truth is that chivalry has long been discounted and civilians — including women and children — are now regarded as the more suitable "guinea pigs" to test out the efficacy of new weapons under warfare conditions. In other words, the armed forces no longer garrison the most dangerous places. This modern truth needs historical support.

### Revolution in Warfare Strategy

The word "strategy" describes the policy decided upon at the top level of a nation, and "tactics" is the term used to cover the methods adopted by subordinates to implement that policy locally.

The revolution began when Zeppelins were directed to fly right over what were regarded as proper military objectives in the 19th century and bomb the civilians in London; the tactical uses of different kinds of bombs were improved in the experience gained in the frequent bombing of the citizens of Barcelona in the Spanish War; they were developed and greatly extended in World War II by directing bombing squadrons to concentrate their attention on civilians. Good tactics, under blackout conditions, were to begin with fire bombs to illuminate targets for high explosive bombs to demolish. "Progress" was consolidated by limiting the supply of "V.1" and "V.2" missiles for civilian consumption.

The revolution was completed when atomic bombs were used against Japanese civilians and the naval, military and air forces were exempted from atomic attack then and in the subsequent Korean war.

In the 19th century civilians were regarded as nuisances to be warned to get out of the way—the worthy motive then was the restraining one of chivalry, for only savages would deliberately mutilate women and children. In the middle of the 20th century the motives are the economy and preservation of the armed forces and the adaptation of the age-old strategy of concentrating the attack without warning on the weakest part of defence, namely unarmed civilians.

In 19th-20th century parlance, we civilians are now

high priority military objectives, and the completion of the revolution has many consequences, which need some elaboration.

In general, Civil Defence personnel must be organised and equipped to mitigate the effects of all known and probable future weapons capable of being employed on a large scale.

In particular, Civil Defence personnel must not suppose that only one class of missile would be used in an attack. We must consider for ourselves what is the worst combination of weapons an enemy can employ and assume that such worst combination will be adopted; then, in the event, be thankful if a weaker combination was encountered. Whatever happens we must never be caught by surprise and be dismayed into hopeless inactivity.

The reassuring truth is that whatever combination of missiles be used, indeed in whatever quantity, something effective can always be done in the zones outside the direct hit area in mitigation.

Civilians must act promptly — pharmacists in determining the limits and concentrations of radioactive areas — others, at first, in small groups in controlling the spread of fire, engaging in light rescue, administering first aid, etc., and, later, as units in a reorganised force which has been strengthened by the arrival of more effective equipment and manpower reinforcements. "Manpower," now that chivalry is discounted, must include women and children power.

At Hiroshima the unfortunate Japanese appear to have been so dismayed by the appalling nature of the tragedy they had not been taught to anticipate that they were numbed into inactivity and allowed fires to spread unchecked for four days and thereby needlessly greatly increased the death roll by incineration. The truth is that one only size 1(x) bomb containing less than three pounds weight of ordinary uranium as exploded — an amount, perhaps, sufficient to act as one detonating charge for a size 800(x) hydrogen missile, against which we have to be prepared to defend ourselves.

These Japanese appear to have been too bewildered to put into practice the very first principle of Civil Defence, namely to concentrate the attention on what can be done in the outer zones, being 94 per cent. of the endangered area, and not to be paralysed by either the thought or the sight of what has happened, past retrieve, in the smaller direct hit zone.

Facing realities—whilst others are bleeding to death; or, being trapped in buildings, are in danger of incineration by spreading fire, we must defer paying our respects to those who died a sudden painless death and attend to the suffering living. Perhaps this may seem cold-hearted, but, as a matter of psychology, the best immediate antidotes for inordinate grief for loved ones and the potential paralysing effects of appalling disaster are the physical actions involved in taking part in organised life-saving.

The strategy is to endeavour to promote panic for peace at any price and the defence is to so fortify the will to win at any cost that an aggressive nation may be deterred from starting a war.

### Tactics Australia Must Organise to Mitigate

General. — Both the strategy and the tactics against Australia would be quite different from those planned against England.

4



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The strategy might well be — England has been a menace to Europe for centuries, during which she has checked military aggrandisement by Spain, France, Germany and . . . On the principle that "Carthage must be destroyed" attempts must be made to obliterate her. Australia, though an important ally, has never on its own account been a danger to any nation, therefore, preserve as much of Australia as possible consistent with its speedy surrender, so that "we" can develop it later with a minimum resort to the then limited space of overseas shipping to replace damaged essential equipment necessary for development.

**Nuclear Weapons.** — Preparations must be made to mitigate the effects of at least two kinds of nuclear missiles being employed in each direct attack on capital cities and other important centres of civilian population.

One kind, which produces little secondary radioactivity, would be exploded high in the air to give the maximum spread of damage by blast against weak roofs and injury by primary radioactive waves coming direct from the missile, by flashburn and flying debris.

The aggressor, knowing the nature and weight of the warhead and the height at which it will be exploded, can predict the dimensions of the endangered area. It would be good tactics to use such missiles against slums, inconsequential factories and sections of cities of little post-war value to him.

Where such missiles are exploded, pharmacists' duties, as officers in charge of the three previously described meters, might be finished a few hours after an attack and they would then be available to assist flashburn cases. Meter reading and interpreting duties would, however, take priority.

A hydrogen or other thermonuclear warhead, which exploits secondary radioactivity (i.e., transfers some of its dangerous powers to objects which intercept and hold the primary rays coming from the explosion and are capable of retransferring them) should be exploded close to the ground so as to erupt and distribute the maximum quantity of secondary radioactive material in the form of boulders, chunks of debris and ashes and dust pulverised into such minute particles that they will "float" in the air. Also to charge with radioactivity rain-bearing clouds, before they are blown out of the way to make room for the fine dust which has been "bounced up." In a low burst, the upwards and downwards primary radioactive rays are utilised to transfer secondary radioactivity. Further, the atmosphere is thoroughly dried and dry dust can be elevated to great heights.

The low burst of thermonuclear missiles will contaminate five zones with secondary radioactivity.

(a) The local zone of direct hit obliterated by blast will receive boulders and other heavy objects so highly charged with secondary radioactivity that concentrations which are lethal after a few minutes' exposure may be established at considerable distances from the crater. Each of the other three zones, tabulated in the first article as (b) severe damage; (c) moderate structural damage and (d) partial damage will all receive their issue of radioactive material in diminishing sizes. The dimensions in radii from ground zero calculated for blast may need some correction to make them appropriate for secondary radioactivity.

In addition, there will be a fifth zone dwarfing in area the total of the four zones, where radioactive dust and/or rain will ultimately be deposited as "fall out."

As pharmacists would certainly have to act on their own initiative in the fifth zone, it is worth while considering some fundamental principles.

The locality, or localities, of the fall out will depend upon the interplay of competing meteorological factors and the amounts precipitated per acre may so vary in quantity in different districts that exposure to secondary radioactive dust, or rain, may be tolerable for minutes, hours, days or even weeks—to be determined by pharmacists with the aid of the three meters and the reference tables.

Australian motorists know how little rain is required to deposit substantial quantities of "mud-globules" on the upper parts of their cars following a hot dry spell of weather. After scattered rains, it is a familiar sight to observe in the cities some cars heavily mud-spotted and others quite clean — depending on whether or not they have recently travelled through localities where light scattered rain has fallen. These sights are so common that they suggest that radioactive dust may not necessarily fall in one elongated zone downwind from the crater — there may be a series of scattered zones.

After warheads which induce secondary radioactivity have been exploded, pharmacists would have the duty of testing mud-spotted cars before they are permitted to park in, say, shopping areas. Whilst one car may or may not carry a harmful strength of secondary radioactivity, an aggregation of cars spotted with mud globules when parked in a sheltered confined space might emit concentrations strong enough to cause local casualties.

Remember — the Hiroshima bomb with a destructive capacity of 20,000 tons of T.N.T. has the measuring symbol — "1(x)" and the size 800(x) hydrogen bomb exploded on the coral island had a theoretical destructive potential of 16,000,000 tons of T.N.T. That would be sufficient power to excavate and elevate hundreds of thousands of tons of building materials, soil, sub-soil and bed rock high into the air in proportions depending on their chemical and geological structure. Being conservative, we may count on, say, 100,000 tons of dry dust and ashes being elevated to heights where meteorological factors take control of their final distribution as fall out. The boulders, rocks, heavy debris would be distributed locally by the force of the explosion and their distribution can, therefore, be predicted with tolerable accuracy when expressed in terms of square miles.

The aggressor has the initiative and can select a day with a cover of clouds at the appropriate height to receive and hold the maximum amount of radioactive rays travelling upwards from the explosion above ground. Being conservative, one 800(x) bomb could contaminate a surface area of 500 square miles of clouds and to depths depending on their density and distance from ground zero. These clouds have to fall somewhere, but not, it is submitted, necessarily on one day nor in one district nor within the confines of the State over which the missile exploded.

The dust is likely to be distributed over greater areas than the initially charged rain clouds; a proportion of it would be blown into the upper strata of the atmosphere never inhabited by rain and may be distributed over half the world before coming into humid strata, absorbing moisture and thereby becoming heavy enough to come to the earth's surface as fall out. By this time, however, it may be so dispersed as to be incapable of building up a concentration harmful to human beings and this is a problem for pharmacists to solve with the aid of their three meters and tables of tolerable dilutions.

**Duration of Danger.** — It is difficult to forecast for what period after the explosion of a warhead which exploits secondary radioactivity tests will have to be continued.

As children we were taught that, after one volcanic eruption where more dusts than molten lava were elevated, sunsets were made more beautiful by the presence in the upper atmospheric strata of those dusts. Those dusts were evidently elevated above rain-bearing strata. One 800(x) hydrogen missile can erupt dust and ashes into these strata, but not in the same volume, and it is likely that they will behave in the same way as the volcanic dusts.

The sunsets, we were taught, continued to be more beautiful for a period of several years and in countries remote from the one in which the volcano was situated.

In an explosion on an uninhabited coral island a positive limit can be set to the duration of the danger by ascertaining the respective half-lives of the calcium carbonate and other chemical ingredients of coral and stat-

ing that the danger will cease at the termination of their respective half-lives.

In a highly industrialised city containing a great variety of chemicals with half-lives ranging from split seconds to millions of years no such ascertainment would have much practical value.

Caution is needed in drawing universal conclusions as to space and time from any number of tests conducted on coral islands located in humid equatorial regions.

Calcium carbonate, having deliquescent properties, rapidly absorbs moisture. Minute dust particles of calcium carbonate would absorb moisture and set up a coalescing process and acquiring sufficient weight to be too heavy to float in the air, hence they would fall like snowflakes. The processes would begin as soon as the atmosphere, dried out by the heat of the explosion, became recharged with humidity and would apply to dust particles which were not elevated above humid equatorial strata. In more temperate zones the process would take longer as there would be less humidity available.

Everyone knows that, if bread be exposed to the atmosphere in summer time it will lose weight by evaporation, but biscuits, similarly exposed, will acquire weight by absorbing moisture. There is no strain imposed on credulity by stating that some soils and sub-soils will not take up moisture as quickly as lime.

If such soils and sub-soils be erupted in the form of fine dust they would take much longer to absorb moisture sufficient to set up a coalescing process and the acquisition of weight sufficient to ensure their precipitation on the earth's surface as fall out.

Meanwhile the wind may have changed direction many times and, having lost the momentum and direction imparted to them by the force of the explosion, they may fall north, south, east and/or west of the crater, instead of in a predictable zone downwind from the crater according to the direction of the wind prevailing at the time of the explosion.

The only practical solution is for pharmacists and other officers in charge of meters to continue to take tests whenever there is a change in meteorological conditions favourable to a local precipitation.

Owing to its proximity to Europe it would be an error in tactics to bombard England with any kind of missile which induces secondary radioactivity on a substantial scale. But, because of our great distance from our potential enemies, the reverse reasoning applies and is supported by the facts that, whilst material damage can be limited to definable areas, the peril to human life is in areas which Sir Winston Churchill aptly described as "measureless".

Doubtless this enormous and unpredictable spread of secondary radioactivity was a strong factor in inducing Swedish authorities to make participation in civil defence compulsory.

We must not overlook the possibility that, even in a war in which Australia remained neutral, if thermo-nuclear missiles were exploded in the islands north of Australia, we could be endangered, for much of our rain originates in the ocean north of Australia and New Zealand must not forget that it receives Australian dust.

#### Warning Periods. (a) Explosion of missiles.

As submarines have been equipped with launching platforms to discharge long-range missiles containing nuclear and other warheads and they could surface out of sight of land, we would not know until radar determined the directions of the missiles whilst in flight whether, say, Newcastle, Sydney or Port Kembla - Melbourne or Geelong, etc., were to be the recipients of the missiles. The warning period would therefore be measured in seconds, perhaps minutes, and its brevity must influence shelters.

#### (b) Secondary radioactivity.

Our meteorological bureau may be able to give some

general warnings hours in advance, similar to those like, frost is expected in named localities, light rain might fall in certain districts.

The final warning of secondary radioactive fall out must be given by the officer in charge of the meters in any district and he must measure its limits, intensity and duration.

**Chemical (Gas) Attacks.** — Although there have been immense developments in gas warfare since the writer's articles appeared in this journal in 1938, here it is enough to state that, as gases do not cause any permanent structural damage, an aggressor who wants to capture and settle people in Australia might resort to them. The possibility of gas must not be overlooked in considering shelters.

**High Explosives.** — Nuclear missiles exploit blast, but not fragmentation of the metal casing for which they substitute higher velocity debris. A tactical development has been to burst H.E. bombs high in the air to make the full use of blast against weak roofs and to reduce the shielding and localising effects of substantial walls against ground bursts. The main danger now is from above and not from the sides.

**Biological Warfare.** — Australia being an island continent is more liable to be a testing ground than countries located on the one land mass. Political iron curtains and customs barriers are of no avail against the spread of epidemic diseases and pests — oceans are. Pharmacists have enough special duties with radioactivity and flashburn to take up their time.

#### Shelters

Owing to the short warning period and the obliteration of direct hit zones, the cardinal principles are partial protection and rapid accessibility and a compromise has to be made after assessing the local value of three groups of considerations.

(1) As it is impractical to give absolute protection against a missile capable of excavating a crater 150 feet deep and in so doing establish a local zone of intense radioactivity from boulders and chunks of debris, deep tunnel shelters are not recommended.

(2) Anderson shelters with a higher baffle wall to cover the entrance from overhead bursts; trenches well revetted and provided with the overhead cover detailed in World War II pamphlets and the concrete pillboxes all offer worth-while protection against blast and flying debris in 94 per cent. of the area endangered and against secondary radioactive fall out as much as 99 per cent.

(3) We must remember that for any form of cover, which will protect human skin from sunburn, will also protect against flashburn; any shelter which will keep out rain, will also keep out radioactive mud globules and any enclosure which is draught-proof is also gas-resisting.

It is submitted that the better compromise for the householder and occupier of a residential shop is to select a passageway where the ceiling rafters are placed crosswise and not longitudinally, or a narrow room and to strengthen, certainly the ceiling, and possibly a section of the roof, so that, if it collapses, it will fall clear of the shelter.

It is desirable to have a supply of blankets and tacks, newspaper and adhesive paper readily available to cover windows shattered by blast with blankets and walls cracked by concussion, so as to make the shelter gas-resisting if gas be used. At low levels radioactive dust, bounced laterally from a crater (not elevated into the cloud area) will diffuse much in the same way as the particulate nose gases did in World War I, against whose entry gas-proof dugouts were effective.

Unquestionably the best form of shelter is to have Civil Defence organised on such a grand scale by governments and so efficiently that an aggressor will be deterred from attacking because his own civilians may not stand up as long to retaliation and may sue for peace at any price, whilst our wills will have been fortified to win at any cost.

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# Foot-Rot in Cattle

By D. M. Flynn, B.V.Sc., Senior Veterinary Officer.

Reprinted from "The Journal of Agriculture" (Victoria), May, 1955.

## Cause

Foot lameness occurs throughout the year in dairy and beef cattle in Victoria, but is most prevalent during the warmer months. The disease is not infectious, and is caused by an organism normally present in the bowel of cattle. Often, several cases may occur in a herd at one period, but this is due to the fact that farm conditions at that time favour the entry of the germ into the hoof.

Foot-rot in cattle appears mainly in the higher rainfall dairying areas, where cattle move along muddy lanes or through yards paved with stone or uneven concrete. Mud mixed with dung becomes packed into cracks or bruises in the hoof, and the germ gains entry to the soft sensitive tissues of the foot.

## Symptoms

The first sign of the disease seen by the farmer is that a beast has an acute, painful lameness in one hoof. This lameness becomes so severe that the animal refuses to put weight on the affected limb and will not move unless forced. The animal will be hunched up and off its feed, and milking cows will show a rapid drop in production.

In the early stages there may be no apparent heat or swelling in the hoof, but later, swelling occurs around the coronet and between the claws, causing spreading of the toes. The foot is hot and painful to the touch, and ulcers may appear in the cleft between the claws. If left untreated, abscesses form and break out between the toes, above the heels, or around the coronet. Deeper tissues, such as tendons and bones, may become affected, leading to a permanent lameness with malformation of the hoof. Cattle with foot-rot rapidly lose condition due to pain and their unwillingness to move about for feed or water.

## Treatment

Foot-rot can be a serious disease in dairy cattle, and stock owners should seek veterinary assistance as soon as the first symptoms are noticed. For treatment to be effective, it should be commenced when lameness first appears. The affected animal should be separated from the herd and put into a quiet yard or small paddock with plenty of feed, water and shelter. The hoof should be hosed clean and thoroughly examined for other possible causes of lameness.

Injections of various drugs in the sulphanilamide group have been found to give quick and effective cures in cases of foot-rot in cattle, particularly when treatment is given early before complications set in. Sulphamezathine (sulphadimidine) can be given as an injection of 100 c.c. to 200 c.c. of 33½ per cent. solution under the skin of the neck, the dose depending on the size and weight of the animal. In most cases, a single injection is sufficient to effect a cure, and the financial loss due to reduced milk production as well as the animal's loss of bodily condition is avoided.

Where an abscess has already formed in the hoof, further injections combined with local treatment of the hoof will be necessary. A dressing which may be painted on in such cases is a strong solution of blue-stone or a mixture of equal parts of creosote, tar and turpentine. A bag boot should be fitted around the infected hoof to prevent contamination with dung or dirt. The dressing should be renewed daily.

## Prevention

Efforts to prevent foot-rot in cattle have not always been successful. Although the disease occurs mostly where cattle with soft hooves, due to moist pastures,

have to move along stony tracks or through unevenly paved muddy yards, there are also outbreaks on properties with well-laid-out yards and concrete paths where mud is no longer a problem.

The disease itself does not set up a strong natural immunity, and cows may become affected more than once during the year. This explains why attempts to produce a vaccine to protect cattle from foot-rot have not so far been really satisfactory. A vaccine produced by Commonwealth Serum Laboratories is available, and trials have shown that this can afford a temporary protection, which may be of use during an outbreak on the farm.

Meanwhile, efforts should be concentrated to avoid farm conditions which may damage the hooves of cattle by bruising and cracking.

Cases which do occur should be treated promptly to avoid the serious losses in production which this disease can cause.

## "I HATE TO BUY DRUGS, BUT . . ."

By Donald G. Cooley

This is the unusual title of an attractive little booklet (author Donald G. Cooley) produced and published by the National Pharmaceutical Council, of 610 Fifth avenue, New York. Its message is an excellent antidote to unthinking complaints of overcharging for drugs.

These passages are taken from the text—

"Have you ever taken a prescription to a drug store and been shocked to the bottom of your pocket-book when the pharmacist said, 'That'll be \$9, please?'

Me, too.

I remember the time a few years ago when our daughter Kathleen was a very sick youngster with a red-hot throat infection. It looked bad to our doctor, and I guess it looked even worse to her worried parents. The doctor wrote out a prescription, and said, 'This is for a very new antibiotic, still pretty scarce.' It generally stops this sort of infection in its tracks.'

Naturally, I took the prescription down to the corner drug store, and handed it to the proprietor, an old friend who kept close track of our family's health through the drugs we bought. He disappeared into his back room, returned in a few minutes with a small bottle containing a dozen or more capsules. He looked apologetic. I soon knew why. He said, 'There's \$15 worth here.'

I was not only shocked, but embarrassed. All I had in my pants pocket was a \$5 bill and some change. The druggist smiled and said, 'I'll bill you.' And he added, 'These capsules don't look like much, but they're really potent. I'll bet Kathleen feels a lot better by tomorrow or next day.'

And so she did. Her fever started to go down, and in a few days she was fine and frisky again."

"Suppose those researchers quit en masse, and pharmaceutical firms restricted their output to a few popular drugs, and pharmacists curtailed the expensive stock of many hundreds of drugs they have to keep on hand to be ready for emergencies? Who'd be down at the corner drug store, pounding the counter, and screaming, 'You can't do this to me!'

I would."

# Complimentary Dinner to Newly Qualified Members of the Pharmaceutical Society of South Australia

This highly successful function, held on May 31 at the Hotel Rundle, Adelaide, was attended by about 70 pharmacists, who crowded the dining-room to capacity. This made the evening a compact and enjoyable one, which will be remembered, more particularly by the guests, for a very long time.

## Toast to the New Members

After the loyal toast, given by the President, Mr. A. C. Holloway, came the toast of "Our Newly Qualified Members," by Mr. K. D. Johnson, who spoke first of all of the service which each now had to perform in a sphere of national importance.

He then pointed out the ill-wisdom of taking such a responsibility too lightly, and that carelessness should not be tolerated. Carelessness usually arose because of mental preoccupation, and so the remedy had its roots in a sense of professional honour.

Mr. Johnson further stressed that professional honour brought its own reward in the confidence and respect of friends and neighbours. Such a reward could continue, provided each new pharmacist developed his knowledge.

A pharmacist with a wide and deep knowledge of drugs and therapeutics would continue to maintain his responsibilities in regard to the health and well-being of the community.

In congratulating all of the new members, Mr. Johnson spoke in particular of two New Australian pharmacists, Messrs. Rand and Trummer, who had reached the State without a knowledge of the English language. By their diligence they had conquered obstacles, passed the examinations required of them, and now, although no longer young men, had achieved a legal qualification for the second time in their lives.

Mr. K. S. Porter, President of the Pharmacy Board, in supporting the previous speaker, said that the new pharmacists could reach the highest form of service by adopting sound basic principles in respect to their work, their pride in their profession, and in the fourth dimension of reaching for goals ahead.

Of these each young pharmacist knew something about work, because of the four years of study which had been successfully undertaken. In the future each would soon know that while the nature of their work changed it would never cease. Out of hard work would come quite naturally pride in profession and a set of principles in the conduct of a pharmacy. Satisfactory daily contact with customers, travellers and others together with the acceptance of family and civic responsibilities led naturally to participation in the work of pharmaceutical organisations, to a broader way of life, and a more effective craftsmanship.

The fourth di-

mensional principle could be condensed into stating that to work with vision, to ethical standards, and to give no place to malpractice, led to a quiet dignity and sound strength as each man did a good job within his own personal ability.

## Responses

Miss Nancy Gerard, as the first speaker, in reply, thanked those who proposed the toast for their kind and encouraging words. All of the new pharmacists had worked together as a team during their happy four years of study, and each hoped to uphold the professional standards set down for their guidance.

More and more girls were entering pharmacy, and on behalf of those who qualified this year she wished to thank the Council and members of the Society for their ready acceptance of women in both the professional and social roles of pharmacy.

Mr. B. Wandke, in his response, spoke of "not joining just another society, but of the pleasure of joining our own society, in which we are truly welcome."

The thanks of all concerned are due to the masters, the lecturers and the fellow-students in the attaining of qualification and the opening up in front of a definite path. All hoped that the kind remarks and confidence which had been expressed by the previous speakers would be justified in their future attainments.

The toastmaster, Mr. A. N. Gould, then called unexpectedly upon Mr. Trummer to reply to the congratulations which had been extended to him at the time when the President of the Pharmacy Board presented the certificates to the newly qualified pharmacists.

Mr. Trummer in his reply spoke of the difficulties which he and his wife, who was also a qualified pharmacist in Hungary, had met with in the camps provided for them on arrival in Adelaide.

The early battles with getting a job other than dish-washing, without an adequate knowledge of English, had been surmounted with their employment by the Friendly Societies' Medical Association and F. H. Faulding & Co.

As they progressed he decided to attempt to qualify, and was very happy to have done so, and to receive—

at the advanced age of 55 years—such a warm welcome by Australians. (Prolonged applause.)

## Presentation of Gold Medal

The President then made the presentation of the Gold Medal to Mr. J. E. Maine, with the remarks that this was the first awarded for five years, in that Mr. J. Duncan, now a Councillor of the Society, held the previous medal awarded in 1949.

Mr. Holloway spoke of the founder of the medal, the late Mr. J. C. White, a man of ethics and ser-



The President presents the gold medal to Mr. J. E. Maine

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vice, irrespective of the time and money involved in that which was required. He then traced the history of the Gold Medal since 1896, and closed with the statement that the award is by no means an automatic one given annually; hence he and other members extended to Mr. Maine their hearty congratulations.

**Mr. Maine** in his expressions of thanks mentioned the assistance of his master, Mr. J. Bird, in questioning him about his lectures and practical work, and also to the good fellowship with other members of his year of studies and with lecturers concerned. "He would value the gift very highly, was proud to receive it, and looked forward to a happy future in his profession."

#### Appreciation of Kodak Prize

**Mr. Maine** again spoke in appreciation of the award of the Kodak Prize, which was presented to him by Mr. R. J. Mitchell, Sales Director of Kodak Ltd., who happened to be in Adelaide on the night of the function.

#### "The Masters"

**Mr. J. Standish**, another of the newly qualified, proposed the toast of "The Masters," and spoke of the help he had received from the managers of J. White & Sons at their North Adelaide branch.



Messrs. J. D. Duncan, E. F. Lipsham and K. D. Johnson

**Mr. D. Rhong**, in reply, hoped that all of the younger pharmacists would continue to justify the confidence of their masters, and further mentioned that the four years of association during apprenticeship often produced a lifelong friendship.

#### Tribute to Lectorial Staff

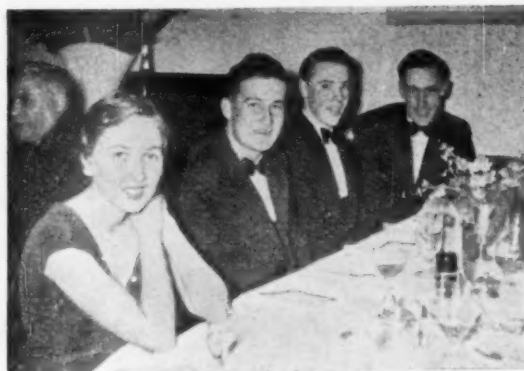
**Mr. J. D. Duncan**, in proposing the toast of the Lectorial Staff, said:

"Mr. President, members of the Pharmaceutical Society, and newly qualified members:

Tonight it is my pleasure to propose a toast to the Lectorial Staff. This of necessity must centre upon the senior lecturer, Mr. Lipsham, and his assistant, Mr. Bowey.

**Mr. Lipsham**, as well as being a fine exponent of the Australian language, has one very necessary quality of a teacher. That is, he can not only impart his knowledge, but, at the same time, can make the student think for himself, so that when he is qualified he is capable of seeking new knowledge and applying it.

It is a credit to a man of Mr. Lipsham's age that he is continuously turning his mind to ways of improving



A Group of the newly qualified members.

J. Palape (1953), Miss G. P. Montgomery, R. N. Watts, K. I. Haddy, M. G. Prosser.

our course, which is already recognised as a leader in Australia.

I have over the past few years sat around the Council table with him, and seen him, with the students foremost in his mind, presenting, somewhat craftily, if I may say so, his plans for this new course we are in the process of adopting.

I am sure that students not only receive a fine education in Pharmacy, but also a wider general education with the inclusion of lectures in Humanities, History and Commerce; these will stand them in good stead throughout their lives.

**Mr. Lipsham** is ably supported by **Mr. Bowey**, who also gives of his utmost to further the profession of Pharmacy. With his meticulous approach to his work, he helps students to develop their power of reasoning, which is of inestimable value in future life.

In conclusion, I would like to leave one thought in the minds of the newly qualified members. **Mr. Lipsham** and **Mr. Bowey** have had your interests at heart now for some four years, and will do so for many more years, and I am sure that they will gladly assist you with any problems that may arise as you go forward in your career. Both men have been good friends to me, and I appreciate, as I am sure you will, their sound counsel and guidance.

**Mr. Lipsham** in his reply thanked **Mr. Duncan** for



From left: T. J. Sawyer, K. B. Glastonbury, D. W. Manhire, J. Palape (1953), P. G. Ball, I. N. Hennessey.



From left: Messrs. Rodrig, Wandke, Holloway, Gerard, Porter, Standish, Martin, Thomas, A. Russell, Gould (at rear).

his kind remarks, particularly regarding the new course. He said it was not designed for the immediate future, but rather for the type of pharmacists envisaged for about 1970. A beginning had been made, but alterations would have to follow as experience grew in the conduct of a course which was not purely scientific and academic in its perspective.

The most enjoyable evening closed some 3½ hours after it started, having proceeded without a hitch under the invisible control of the Secretary, Mr. H. C. Martin.

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### Fourth Article

#### What to stock : Shutters

The two basic types of shutters are the focal plane and central shutters. Focal plane shutters are used for high speed. Their only disadvantage against a central shutter is that synchronisation is not possible on all speeds. Focal plane shutters are used in high priced cameras.

**Central Shutter:** There is a big quality variation in central shutters. Besides the American shutter manufacturers, the leading shutter manufacturers are Gauthier, making the Simphon, Vero, Vario, Pronto and Prontor shutters, and Deckel, who produce Compur shutters.

The central shutter is so called because at one time it was situated in between the lens elements. However, modern cameras developed after the second world war have the lens in front of the shutter. This arrangement has considerable advantages, particularly as far as repair work is concerned, as the original factory lens setting remains undisturbed. This design also made possible the interchangeable lens cameras.

The maximum focal length on a 35 m.m. camera with central shutter is 135 m.m., but this is exceptional on the Paxette, and other cameras take only up to 100 m.m. lengths. The reason for this is that the opening of the shutter is considerably smaller than the size of the picture, and thus a full coverage of the negative area cannot be achieved in the case of central shutters and long focal lengths.

#### What to stock in 35 m.m.

In advanced cameras, the 35 m.m. size models are rapidly capturing the market and, therefore, careful consideration has to be given to stock, as the variety is big, and the average retailer would obviously not be able to stock all, but has to pick the best. Thirty years ago the then new system of metal tubing to replace bellows was invented by Ernest Leitz and applied by him on several cameras above the £100 price mark. It was not until after the second world war, however, that this system was applied to the medium and cheaper priced cameras. Even then, most of the manufacturers overlooked the important fact that a 35 m.m. camera needs helical focusing applied as in the original design, as this is essential for the accurate work necessary in 35 m.m. as well as for long service. The application of helical focusing means that when the focusing is adjusted the whole lens moves, not only the front element.

In this type of 35 m.m. camera it is also important that the body and body frame should be diecast, as this gives the best rigidity and most accurate manufacturing method.

The production of diecast cameras in the medium price range can only be achieved if the manufacturer is assured of a big market, as the dies are very expensive. In this range it is also important that the camera should have a fixed tube, as collapsible tubes cannot be manufactured as satisfactorily and cheaply, as tolerances are very small. Of course, the lens system is also of utmost importance, but many makes in the lower priced 35 m.m. cameras do not comply with basic requirements. However, as the lens system was dealt with in the former issue, no more details are necessary.

With these basic points in mind, Carl Braun, of Nurnberg, designed the Paxette series, which has undoubtedly become the most popular 35 m.m. camera, and is the best priced range in this field.

The 35 m.m. construction with tube has a further advantage inasmuch as it makes possible the interchangeability of lenses. This feature has the definite advantage of comprising two, three, four or more cameras in one when different lenses and accessories are applied. In this way the camera becomes a most versatile unit and capable of dealing with various subjects.

The fully interchangeable lenses will give the best possible definition right to the corners and an absolutely even lighting of the surface of the negative. Certain experiments have been made by attaching a telescopic lens complement to the existing lens in non-interchangeable lens cameras and the changing over of front elements of lenses to a front element which alters the focal length of the total lens combination. However, neither of these will give the same exact results as if the standard lens is fully exchanged for another focal length of lens.

#### IN SUBSEQUENT ISSUES

What to stock in  $2\frac{1}{4} \times 2\frac{1}{4}$ ,  $2\frac{1}{4} \times 3\frac{1}{4}$ .  
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# Pharmaceutical Society of Western Australia

## Graduation Ceremony

The Sixth Annual Graduation Ceremony of the Pharmaceutical Society of W.A. was held at McNess Hall, Perth, on May 25.

The President, Mr. R. I. Cohen, who opened the proceedings, tendered an apology from Mr. W. G. Hayman, Superintendent of Technical Education. He also extended a welcome to parents and friends of the graduates and to distinguished visitors, mentioning the Minister for Education, the Hon. W. Hegney, who had consented to address the gathering; Mr. R. Davis, Principal of the Perth Technical College; Mr. T. D. H. Allan, a former councillor of the Society, and Mrs. H. M. Lyons, who was the first woman pharmacist to qualify in W.A. and also the first President of the Women Pharmacists' Association of W.A.

Those ladies and gentlemen present representing the donors of the various prizes and awards so generously given each year were also welcomed.

The Meyhew dispensing prize, given to perpetuate the memory of Edward Mayhew, first Registrar and former President of the Society, would be presented by Mr. G. D. T. Allan, President of the Pharmaceutical Service Guild of Australia (Western Australian Branch).

The Mrs. Lyons prize for Organic Chemistry would be presented by Miss E. Gray, President of the Women Pharmacists' Association.

The Kodak prize of £25 annually would be presented by Mr. R. J. Mitchell, Director of Kodak (Aust.) Pty. Ltd., who, by a happy coincidence, was in Perth, and he had been prevailed upon to present the prize.

Rumbles Ltd. offered 30 guineas, which was divided into three prizes of 10 guineas each. These prizes would be presented by the Managing Director, Mr. Ross Rumble.

The Parke, Davis prize, which carried the enjoyable privilege of a trip to Sydney with all expenses paid, would be presented by the W.A. representative of the company, Mr. R. F. Trodden.

Fauldings Bursary, valued at £25, donated by F. H. Faulding and Co. Ltd., was divided into several groups, and would be presented by the Sales Manager, Mr. R. Miller.

The President said the order in which prizes would be presented would be, firstly, the presentation of diplomas and prizes which are awarded by the Pharmaceutical Council, then the certificates and prizes of the other years.

Dr. Eric Watson, Head of the Department of Chemistry at the Perth Technical College, presented the recipients to the President, who then made the following presentations:—

J. D. Forgan, Diploma, Reg. Certificate, Final Exam. Certificate, Webster Memorial Gold Medal, Phar.-Materia Medica Prize.

E. G. Kirk, Diploma, Reg. Certificate, Final Exam. Certificate, Phar.-Materia Medica Prize.

H. Hertz, Diploma, Reg. Certificate, Final Exam. Certificate, Pharm.-Materia Medica Prize.

J. Benn, Diploma, Reg. Certificate, Final Exam. Certificate, Phar.-Materia Medica Prize.

Also Diplomas, Registration Certificates and Final Exam. Certificates to:

Joan Elizabeth Chaloner, Kevin Norman Chatfield, Brenda Cleave, Matthew John Companti, Anthony Michael Forte, Brian Gjakun, Roger Seymour Groom, John Bradshaw Green, David Tregurtha Hughes, Colin Ernest Kennedy, Bruce Alfred Maywood, Kathleen Ruth Miller, Geoffrey Noel Mountain, Kathleen Wynne McGuckin\*, Judith Mary Norrish\*, Brian Francis O'Brien, Brian John Street.

(\* In absentia.)

The following certificates for Annual Exams were presented:

**Third Year.**—Gerald Hargrave Cohen, Robin Laurie Crawford\*, Neville George Crump\*, Laura Einihovici, Janet Margot Firth, Harry John Gunzburg, John Wallace Hamersley, John Edward Jack, Donald Claude Matthews, John Michael O'Hara, Grant Marshall Paterson, Terence Owen Price, Patricia Joan Roberts, Robert Balfour Robinson, Graeme Bruce Sherry, Brian John Silbert, Audrey Jean Stevens, Phillip George Waring.

(\* In absentia.)

**Second Year.**—Geoffrey Allan Bingeman\*, Don Bodlovich, Brian John Elliott\*, Kevin Michael Fogarty\*, Rosemary Joy Fowler, Neil Joseph Genev\*, Geoffrey John Hollyock\*, Percy John Johnson\*, Dorothy Elayne Judd, Alex Kauler, Kevin Michael Keating, George Kostadinov\*, Sylvester Lane, Valentine Richard Lewis, John William Major\*, Kevin Graeme McKenzie, John Bevan Nicholas, Julie Helen Pearson, Myrtle Jean Pumfrey\*, John Llewellyn Rees, David Benjamin Schenberg\*, Victor Spiro\*, Nathan Wende, Derek A. Woodman\*.

(\* In absentia.)

**First Year.**—John William Begley\*, Brian Robert Carlisle, Murray George Edinger, Roy Desmond Edinger, Bernice Evelyn Eggleston, Anthony Victory Garbin, Jim Morrell Hawkins, Ernest James Hogan, Gerald Mervyn Hubbard, Arthur Frederick Hunt, Kenneth Holborne Hurst\*, John Maxwell Knowles\*, Carmelo Manera, Eleanor M. Moore, Leith Ian McKenzie, Barry Francis McMahon\*, Terence Cornelius McManus, Robert Richard Nicholls, Ian Graeme Rear, Graham Ronald Richmond\*, Hymen Rosenberg\*, Peter John Tuohy, Alan Douglas Wager\*, Rodney Ian Walton, Margaret Anne Whittle\*.

(\* In absentia.)

### Mayhew Dispensing Prize

Mr. G. D. T. Allan, who presented this prize, said it was very fitting on an occasion like this to pay tribute to a stalwart of their profession in Edward Mayhew. Those who knew him appreciated the great sacrifices he made and the work he had done for their profession in the early days of this century, both in establishing or assisting to establish a high educational level, and in putting it on a sound, ethical footing. The students of today were reaping the benefit of that work. When Edward Mayhew died, round about 1930, it was a sad loss to pharmacy. Mr. Allan said it was a great privilege for the Pharmaceutical Service Guild to have the honour of presenting this particular dispensing prize to a final student in each year, and he felt very privileged personally to be able to attend and make the presentation to their friend, Brian Alfred Maywood.

### Mrs. Lyons Prize for Organic Chemistry

Miss E. Gray said this prize was awarded to the third year student who had gained the highest marks in Organic Chemistry. This year Mr. Brian Silbert had

very brilliantry merited the award. This prize was created by the Women Pharmacists' Association many years ago, and it was now called after Mrs. Lyons. Because of Mrs. Lyons associations with pharmacy, to which the President had made reference in his introductory remarks, she did not think they could have named the prize after anybody more eligible. Mrs. Lyons had been a wonderful woman, both for the women pharmacists and for pharmacy in general, and she felt that if Mr. Silbert followed in her footsteps, ethically and in his attitude to pharmacy, he also would be an attribute to the profession.

#### Kodak Prize

Mr. R. J. Mitchell said he had come a long way to present this prize, and he only wished he had come specially for that purpose; but there was just a little bit of George Washington in his family, and he had to admit it was just a coincidence that he was present. Nevertheless he was very glad and highly privileged to make this presentation to Mr. Forgan, whom he congratulated and wished every success in the future.

#### Rumble Bursaries

Mr. Ross Rumble said over the years that his company had had the privilege of granting these bursaries it has indeed been a thrill to attend the presentation ceremony. He had always thoroughly enjoyed listening to the guest speakers address the assembly, but most of all to come along to meet and be amongst friends. Mr. Rumble then presented bursaries of £10 each to the following: B. J. Silbert, K. G. McKenzie and C. Manera.

#### Parke-Davis Prize

By way of introduction, the President remarked that this prize had already been enjoyed by the two recipients. Now the W.A. representative of the company would give them some tangible reminder of the trip.

Mr. Trodden said it was with pleasure that he gave to Messrs. J. D. Forgan and H. Hertz a record of their trip when they were guests of his company in Sydney. He believed they had a most interesting and enjoyable time. They were also fortunate to see over the £1½ million factory of Parke-Davis in Sydney, which he was sure must have been an eye-opener to them. He wished them all the best.

#### Faulding Bursaries

Mr. R. Miller, Sales Manager, said he was delighted to represent his company and to be associated with the presentation of prizes. One of the bursaries was for the first year and three were for apprentices who had just started their career. It was hoped that this little encouragement would help them to realise the necessity of examinations and the need to do their best. Mr. Miller then presented the following bursaries: £10 to Miss E. Moore and £5 each to Miss J. E. Shepherd, Messrs. M. P. Sparrow and G. C. Miller.

#### Congratulations From the President

The President said: "The pharmacy course is not an easy one. Assiduous work and concentration are essential if success is to be achieved, and of course the student must forego many of those normal recreations to which he looks forward through his adolescent years. Those who have achieved a pass are to be commended, and high praise is due to those who have obtained various prizes and awards. We must remember, however, that candidates are many and awards are few. Very often a bare margin separates. In a highly competitive year a student might easily miss an award with marks which would earn one were the competition less keen. I mention these facts particularly to give some solace to those who, with excellent marks, have

just missed gaining a prize, but more particularly to remind prize winners that the knowledge of their success must be a sufficient reward without them, for commercial purposes, announcing to the world that they have won a prize in this or that subject.

"The subject of ethics is too vast a one to be the text of an address on a night such as this, but, broadly speaking, I think we can say that we regard ethics as a system which lays down the attitude which one person should adopt towards another. As chemists it is very important that we should regard all our colleagues as our equals. To imply, as is sometimes done, that we are more highly qualified than another, is not only unethical, but generally it is almost untrue. However, I think there is little likelihood of the present-day graduate adopting such tactics on entering into business. As you have all worked together and enjoyed your ordinary contacts together, so you should esteem each other sufficiently to let your regard assist you in that direction. So, once again, I offer the very heartiest congratulations to all these graduates, and I hope that the first, second and third year students will go on to even greater strength next year."

At this stage, Mr. Shilkin, of Parke, Davis & Co. Ltd., made known the fact that his company wished to present a set of pictures on the early history of pharmacy. In making this presentation, Mr. Shilkin said the pictures were works of art themselves, and had taken a lot of work to prepare. Pharmaceutical history dated back 4000 years. The art in the pictures was near perfect, but the art of pharmacy must be perfect, and with that thought in mind he presented the pictures to the Council for display in the College.

The President accepted the pictures with thanks, stating that they would be suitably framed and hung.

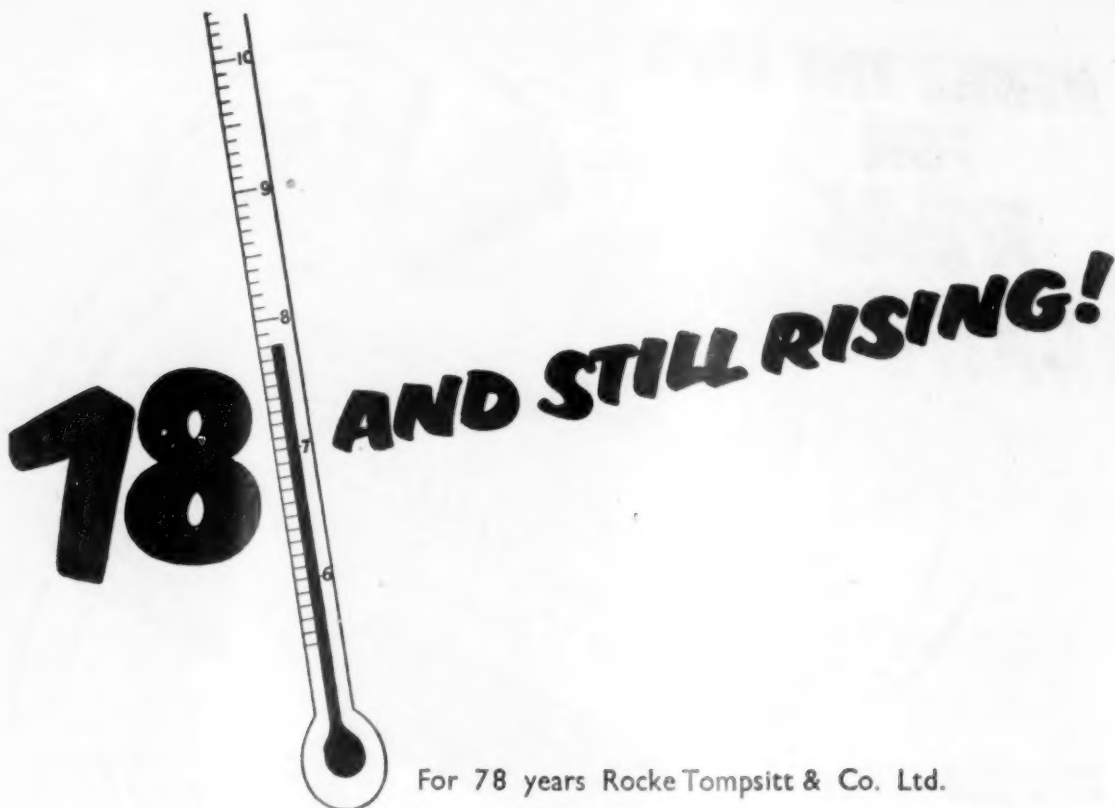
#### Address by the Hon. W. Hegney, Minister for Education

On being introduced by the President, Mr. Hegney said:

"I would like to first of all express on behalf of Mrs. Hegney and myself, my keen appreciation for the invitation which was extended to us to attend this function.

"I would like to say as an ordinary member of the community, as well as in my capacity, for the time being, as Minister for Education, that I feel very privileged to be here, and I gained a lot of pleasure from it. I get a lot of pleasure personally from being amongst gatherings of a similar nature, to meet young men and young women who are trying to do the best they can for themselves and for their fellow men in the community in which they live, and what is very important and thrilling is to see a number of the parents, too, which shows that the students are proud to have their parents with them, and it shows also that mother and father are very proud to see their son and daughter making a niche for themselves in the community.

"From enquiries I have made in regard to the profession of pharmacy, I find that at the Technical College there are now approximately 100 students—21 have qualified this year, and the intake has been 30. This is very promising. I find also that those who qualify find little or no difficulty in receiving a suitable appointment, and I understand, too, that any apprentice can look forward with confidence to the future, because the field is one which is expanding. It is also noteworthy that the qualifications which are received in this State and the diploma which is eventually passed to the successful student, is recognised in every State of Australia and in Great Britain. This shows first of all that the profession in this State realises that the standard must be set at a high level, and it is also, I suggest, an indication of the value and the quality of



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the instructors in our technical schools. I refer now to the Perth Technical College.

"Before I pass what might be called a few relevant remarks on education generally, I may say I was very pleased and impressed with the remarks made by your President in regard to the ethics of the profession. I am not going to give a lecture tonight, but there is no doubt that due emphasis must be placed on that aspect of such a noble profession. We know that in any community in the country or in the suburbs, the local chemist is an outstanding figure. He is held in high esteem in a community, and that is rightly so. He certainly does not take the place of the doctor, but it is quite certain that he is a very important unit in the community in which he is practising.

"As you go along through life, I think the sentiments I now voice will be subscribed to by the elder members of the profession—those who have won the respect of their fellow citizens. Something money cannot buy is the respect of your fellow men in the community. If you adopt the ordinary ethics and the ordinary standards of the profession, you will make your mark in the community, and you will be a highly respected member of it.

"The work that has been put in by the students during the last four years has been very strenuous. It is part of one's education to equip oneself for later life and, of course, one of the purposes of education is to equip one to earn one's living. Another is to help one to live as an ordinary citizen in what we regard as a democracy. Another is to develop all the latent talent that one possesses so that he or she can live and enjoy a good life amongst their fellows. I realise that the success which has attended the efforts of the young men and women who have received their diplomas this evening is the result of long hours of study and sacrifice. It recalls the words of the poet who said:

"The heights by great men reached and kept,  
Were not attained by sudden flight,  
But they while their companions slept,  
Were toiling upwards in the night."

"To those just starting, four years may seem a long time, but to look back on four years seems only as yesterday; and to look back on 20 years seems a little more than 20 minutes! It is one of the troubles today, I suggest, with some of the boys and girls when as juniors they can receive very high rates of pay. The boys are much tempted by the extra few shillings a week. Boys who go to the Technical School and take on apprenticeships find in five years time they are fully qualified tradesmen and have the advantage of schooling all their lives. But the boy who seeks the extra few shillings and does not worry about doing any study falls into the unskilled or semi-skilled pool of labour, I am sorry to say. I know that does not apply to the type of parent who is here. It is a tonic to see the types of young men and women who have realised the duty they have to themselves, and to their parents, and to the community. I would take this opportunity of extending my sincere congratulations to each and everyone of you, and I sincerely trust you will have every success in your future career.

"Now, in regard to education generally. In the Perth Technical College, Leederville, Fremantle and Midland Junction, there is a total of 4800 apprentices in a multitude of courses, including pharmacy, and all the trades, and a number of callings for females. Running similarly with the Perth Technical College, or running in conformity with and in close relation to it, is the Technical Correspondence School. All through the country there are men and women who are taking on correspondence courses for the purpose of improving their lot and making themselves more proficient in the community.

"In the Education Department of W.A. we realise that the facilities for technical education are not all

they might be, but we are hoping to relieve some of the congestion shortly by having parts of the technical school transferred elsewhere to some modern buildings. The principal and instructors have done a wonderful job, over a period of years, in trying to co-operate with employers and the students for the purpose of seeing that these students get the best possible education, and every possible encouragement so that they can make themselves confident in the particular calling which they may follow. In this State, which is expanding in greater ratio than any other State in the Commonwealth, and with the number of New Australians who have come here over the last few years, a very heavy strain has been imposed on the education concerns in W.A. Our problem, with the increasing demand for teachers, is to keep pace with the demand. So far as the State is concerned, it can only act on what we term a priority basis, and do the best we can in any particular district to cope with the demand of our educational system in trying to keep pace also with our technical and professional requirements. W.A. will need more engineers, technicians, scientists and agricultural advisors, and I suggest that anything that we can do to encourage the young boys and girls who leave school to realise their obligations to themselves as well as the community, and carry on their studies after they leave school, we will be doing a very good service.

On behalf of the Education Department I would like to extend my sincere congratulations to all those young men and women who have been successful, and those who have not received prizes should not be discouraged. If a person does his best in the community, he can look everybody in the face; in these days nothing less suffices. Whatever occupation one finds oneself in, if the best effort is put forward, honest effort, then he or she can derive a tremendous amount of satisfaction. But if a person thinks, well, I can get away with half the job, that will not suffice. Do your best as you go along through life, whether at studies or anything else, and you will derive a great amount of satisfaction. I express pleasure at being here, pleasure at being in such company. I wish each and everyone of you every success in your future career."

#### Vote of Thanks

Mr. A. A. Baxter proposed a vote of thanks to the Minister for Education and the various people who had contributed towards the success of the graduation night. For several years now the Council had arranged these graduation nights to be an incentive to the students as they went through their course and finally received their diplomas, and in doing so they had always endeavoured to have as a guest speaker someone linked with education. This evening they had been particularly honoured in having the Minister for Education, Mr. Hegney, to address them, and he was sure they will all agree that the address given to the students in particular had been well worth while, and they thanked the Minister for the address he had given. He would like to embrace in his remarks those who as donors of the prizes and bursaries had contributed towards the evening's success. He felt he must also add a special word of thanks to the President and the Registrar, who had planned and carried through this evening's function so smoothly.

Mr. Forgan, on behalf of the students and graduates, said he was sure everybody had enjoyed the very interesting address given by the Minister for Education. The Council of the Society had been very helpful and encouraging, and sound advice had always been readily given. He also wished to thank their lecturers, Dr. Watson and Mr. Nicholas. The high standard in pharmacy in W.A. was mainly due to the efforts of Dr. Watson and Mr. Nicholas.

The ceremony closed with the playing of the National Anthem by one of the students, Mr. Rodney Walton.

# Economics of Pharmacy

By H. W. Tomski, B.Com. (Lond.), M.P.S., D.B.A. Fellow of the Royal Statistical Society.

## Concluding Article: (No. 12) FUTURE TRENDS

The primary function of an economist is that of an analyst. Unlike his colleagues in the field of the natural sciences he cannot readily predict the future with anything like the same degree of accuracy, for economics is chiefly concerned with the study of human behaviour and with the choice which individuals make under conditions of scarcity. Individual thought and popular feeling, however, tend to be greatly influenced by events outside the realm of logic and reason. All the economist can do is to help to make the choice more rational, but the onus of the decision must always rest on the shoulders of those who are responsible for contemporary pharmaceutical policy.

Towards the latter part of the 19th century pharmacists had cause to be apprehensive about the future of the profession, because price competition in unbranded goods, severe price cutting and the impact of proprietary medicine advertising was about to change the nature of pharmaceutical retail distribution. A contributor to the "Pharmaceutical Journal" in 1878, tells an eloquent story of the pharmacists' fears and consternations at that time. "Either the pharmacist will have to make such additions to his stock to enable him to live, as will so disfigure his business as to render it no longer recognisable as an establishment in which chemical knowledge is exercised, or quietly submit to utter ruin." Since then, many attempts have been made to compare and evaluate the virtues and failures of professional and commercial pharmacy. Traditional pride in their calling has always tempted pharmacists to prefer that side of the business where "chemical knowledge was exercised" instead of realising that both were equally essential for future economic stability. The need for a wider knowledge of elementary business methods was fully recognised by a Special Committee of the Pharmaceutical Society of Great Britain in 1938, but no practical steps were taken to train pharmacists for the vital task of modern pharmaceutical retailing. Perhaps it was felt that "attention to business methods would stamp him too strongly as a trader and detract from his status as a pharmacist." The contributor to the "Pharmaceutical Journal" clearly had vision when he assessed the position in 1878. Pharmacists in the future would have to be members of two great professions: the profession of pharmacy and the profession of business. The transition of pharmacy from an art and ancient craft to a profession and modern retail business was the inevitable outcome of the commercial and medical revolutions. It was a question of either accepting the changed conditions or of submitting "to utter ruin." Selling techniques changed from fulfilling a customer's want to attracting him and "creating" a want. But there were many who felt that such practices were "unethical," and pharmacists were not the only ones. John Ruskin, who lectured on the subject of economics, explained the financial failure of a tea shop which he used to operate by the habit of the poor who "only like to buy their tea where it is brilliantly lit and eloquently ticketed. I resolutely refuse to compete with my neighbouring tradesmen either in gas or rhetoric." While the developments of new retailing techniques and methods of large-scale selling were inevitable, the decline of individual retail pharmacy as the result of the growth of institutional pharmacy is not. It is only inevitable if pharmacists close their eyes to the realities and fail to notice trends which will influence the future of pharmacy far more than the

establishment of company pharmacy did in Britain after 1880.

The rapid growth of the power of capital and the belief in the sanctity of the economic principle of laissez-faire were characteristic of the economic life during the early part of the 19th century; State intervention and increasing control by government authorities were the prominent features towards the end of the same century. At first benevolent paternalism and voluntary aid by individuals for the benefit of their less fortunate fellowmen was supplemented by national help and assistance for those in need. Finally the modern Welfare State evolved which guaranteed every member of the community equal opportunities and provided him with the essentials of life "from the cradle to the grave." Unquestionably, pharmacy in most countries has greatly benefited from the development. The number of prescriptions has increased, the public has become more and more health-conscious, and economic considerations do not enter as far as treatment is concerned. Nevertheless, many pharmacists are seriously perturbed about the high price which pharmacy may be called upon to pay in the future for a few temporary financial gains.

The function of institutional pharmacy is strictly defined in most countries on the Continent of Europe. Hospital pharmacies must obtain their pharmaceutical supplies through a retail pharmacy, and no dispensing services can be provided for any of the hospital's outpatients. Such limitations, which are an accepted rule of practice, are not in existence in Britain, in the U.S.A. and in many of the Commonwealth countries. In Britain the value of drugs and medicines supplied by pharmaceutical houses to hospitals accounts for almost 30 per cent. of the industry's total output for national health service requirements. Following the extension of the National Health Insurance scheme to cover the whole of the population and the provision of specialists' services in hospitals, the demand on pharmaceutical institutional services has increased to such an extent that unqualified staff had to be employed on a considerable scale to deal with the many additional duties. While a pharmacist is in charge in most hospitals, qualified pharmaceutical supervision is not a legal obligation, and this fact alone detracts from the professional value of a pharmacist in the hospital service. The possibility of dilution of labour partly explains the relatively poor remuneration received for pharmaceutical hospital work. To raise their own professional and economic status within their own organisation hospital pharmacists have undertaken to manufacture ampoules, tablets, etc., have advocated the substitution of prescribed speciality products by official preparations and have suggested to hospital authorities that central purchasing would help to keep prices down to an absolute minimum. Whatever the merit of their case, any attempt of destroying the protection of a trade mark and of promoting cut-throat competition will ultimately tend to curtail pharmaceutical research and will result in chaos to the whole of the drug trade. For some years to come the growth of the pharmaceutical hospital services will still be masked because of a continuously increasing demand for pharmaceutical services everywhere. The impact of clinic pharmacies, however, is likely to be more direct and much more noticeable.

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assured that the goods and services supplied to him are sold at "fair and reasonable" prices. Always will he examine ways and means of reducing costs, exploiting his monopolistic position to the full. In the initial stages a monopolist will require cost and profit investigations, but the possibility of producing the commodity is never far from his mind. Obviously he will not wish to become a producer if he can buy the commodity at a price below his own cost of production. Now, a retail pharmacy has to provide a continuous service throughout the whole of the day, but a Health Centre pharmacy can operate with greatly reduced expenses, provided that its services could be made available only during certain special hours. To test possibilities of economising in this manner, an experimental dispensary was opened last year in connection with a Scottish Health Centre. Hours of service were strictly co-ordinated with the hours of maximum demand. Although privately or company owned pharmacies in the area take it in turn to operate a rota system after normal business hours and have made arrangements for urgent prescriptions to be dealt with on Sundays and public holidays, the Centre pharmacy keeps open every evening after normal closing time, but does not find it an economic proposition to provide an emergency service on Sundays. The decision to accept late evening dispensing was based on the observation that more than one-third of all attendances at the Centre were recorded during the evening sessions. Pharmacists are fundamentally interested in the response of the general public to Centre dispensing. Are they not likely to prefer their prescriptions to be dispensed by a person whom they have come to trust in the past? Undoubtedly, many patients would not wish to change, but the Centre pharmacy can be expected to get its fair share of dispensing, especially in newly developed areas. After all, it is convenient to obtain the medicine "on the spot." The official report on the operation of the experimental dispensary cannot be ignored by any responsible pharmacist who prefers private practice to State employment. The report reads: "At the end of the period it was obvious from the number of prescriptions dispensed that the service was an established feature of the Centre, and it was obvious, too, that more members of the local population not on the list of the Centre doctors were becoming aware that any N.H.S. prescription could be dispensed in the pharmacy."

The problem of the Health Centre Pharmacy is not entirely new, and is by no means confined to Britain. Similar dispensing units were in operation in the industrial regions of Poland before the war, and the increase in the number of clinic pharmacies in certain parts of the United States is causing considerable concern there. It is particularly the small individual pharmacy with the highest proportional income from dispensing which stands to suffer most. "Economic necessity," said the Secretary of the Iowa Pharmaceutical Association recently, "is forcing many pharmacists to wonder whether they would be better off under socialised medicine." He was discussing competition from clinic pharmacies. Institutional pharmacies operate under a system of "unfair advantages." Salaries are universally lower than those paid to pharmacists in retail practice, and the pharmacies enjoy many privileges not available to retail chemists generally.

In the commercial sphere the present trend towards larger establishments will continue in the future, and pharmacists will consequently have to widen their range of goods. Whether dispensing will remain a substantial part of the pharmacist's business will depend on the intentions of national health authorities and the attitude of chemists towards institutional pharmacy. In the interest of the profession as a whole now and in the future every possible effort should be made of securing adequate professional remuneration for hospital pharmacists and of limiting the number of unqualified assistants which a pharmacist is professionally capable of supervising. Chemists, further-

more, must become public'y conscious. They must help to educate the public so that every member of the community understands the importance of the pharmacist as a member of the national health team. Pharmacists must show personal interest in modern methods of business administration. They must try to become experts in the science of retailing and of commercial psychology. Finally, the general appearance of their shops must be attractive, in keeping with modern trends and proof of the high professional and commercial status of pharmacy. Personal integrity, courteous service, administrative efficiency, well-planned joint publicity and complete co-operation between all members of the profession are essential if pharmacy is to maintain its dual position as a trade and profession.

#### THE GROWTH OF MULTIPLE PHARMACIES.

Great Britain: 1895-1950.

Year.	NUMBER OF MULTIPLE PHARMACIES	
	Actual.	Per 100 Independents
1895	178	2
1914	940	10
1920	1044	10½
1938	2462	20
1950	2508	22

SOURCE: Retail Trading in Britain, 1850-1950 (James B. Jefferys)

#### POLISH PHARMACIES: LODZ, 1934

Type of Pharmacy.	TOTAL NUMBER OF PRESCRIPTIONS	
	Per Pharmacy.	Per Assistant.
Private	10125	3115
Nat. Insurance	164400	7340

SOURCE: Biuletyn Farmaceutyczny N.3, 1948

#### PROPORTION OF N.H.S. DISPENSING. Great Britain: 1953.

TYPE OF PHARMACY.	PERCENTAGE
Multiples	24.8
Independents	
Large	30.0
Medium	31.6
Small	35.3

SOURCE: Nielsen Survey.

#### HOSPITAL PHARMACY STAFF Professional and Technical At 31st December.

	1949	1951	1952
	%	%	%
<b>Pharmacists—</b>			
Full Time . . . . .	58.0	55.8	53.5
Part Time . . . . .	7.0	6.4	5.7
Students . . . . .	2.9	3.1	3.6
	67.9	65.3	62.8
<b>Assistants in Dispensing—</b>			
Full Time . . . . .	24.6	29.0	31.6
Part Time . . . . .	6.8	4.7	4.7
Students . . . . .	0.7	1.0	0.9
	32.1	34.7	37.2
<b>TOTAL . . . . .</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>
<b>No. Full-time Pharmacists</b>	<b>1,076</b>	<b>1,165</b>	<b>1,189</b>
<b>Full-time Pharmacists per Students . . . . .</b>	<b>20</b>	<b>18</b>	<b>15</b>

SOURCE: Report of the Ministry of Health (1952).

# Receiving, Checking, and Marking Drug Store Merchandise . . . .

By Phil Glanzer (Canada).

Regardless of its size, a drugstore should have a definite and adequate place for receiving its merchandise. The receiving point or station may be in the basement, on the sales floor, or in the back room.

Efficiency requires that there be designated for this purpose a permanent floor space, which will depend, of course, upon the location most suitable to the store's layout. By no means, however, should the public foot-path be used as the store's receiving point, and the practice of using the sales floor is disapproved by most druggists except for certain types of merchandise.

Briefly stated, the argument in favour of establishing a central receiving point is this: It assures maximum control of merchandise; facilitates accounting control; saves valuable floor space, standardises all receiving activities, and permits the merchandise to be checked, marked and moved to designated places in more logical order.

What are the several steps involved in receiving, checking and marking drug store merchandise? These may be stated as follows:

## Receiving the Merchandise:

The merchandise must be taken from the deliveryman, who may be the express or freight agent, the wholesaler's deliveryman, or the transportation agency at the receiving point. At this time the packages, boxes or cartons should be inspected for possible damage, and checked to determine whether the shipper's name and the number of packages correspond to those on the receipt presented by the carrier. No attempt should be made at this time to inspect the quality or quantity of merchandise involved.

## Signing the Receipt:

The receipt should be signed. Where damage to containers appears, the word "damaged" should be written on the receipt. This will facilitate the filing of claims, whether against the vendor or the transportation company.

## Setting Up the Receiving Register:

A receiving register should be kept by the person receiving incoming merchandise. The register may consist of a form with columns to record the information desired for a series of shipments, or may be a separate sheet to record data for an individual shipment. Regardless of the type of register used, the essential facts to be recorded are: The name of shipper, date of receipt of goods, number of packages, register number of invoice, delivery charge, form of transportation, and condition of merchandise. This record will prove useful in establishing whether or not a shipment has been received. If the shipper should claim that it had been received, the absence of either or both the signature and the entry in the receiving record would

materially aid in establishing the question of non-delivery.

## Checking the Merchandise:

The use of portable tables on which to perform the checking function has been found generally more satisfactory than stationary tables. The important thing is that the merchandise be thoroughly checked, preferably against the invoice. Where this is not available, a dummy invoice may be made out by the checker. The checker should be held responsible for both the quantity and quality of the checking. In case of discrepancies, the person doing the checking should promptly notify the manager in order that proper claim may be made against either the vendor or carrier, depending upon who is at fault.

In the checking process, no pharmacist should instruct an assistant to "pick up goods from the back room" or some other spot, and put it on the shelf, without carefully checking to make certain the goods called for on the invoice or shipping order are actually there. If he does, he loses his last opportunity to avoid payment for goods not received.

## Marking the Merchandise:

The proper marking of drug-store merchandise is one of the most important non-selling functions carried on in the store.

Generally this falls into three categories: (a) Merchandise to be individually marked, (b) merchandise to be bulk-marked, and (c) merchandise to be non-marked.

The essential information required on price-tickets may include the cost of the merchandise, the retail price, date of receipt of merchandise and source of merchandise. It is desirable, for obvious reasons, to place the price of the merchandise in code. Since most code systems can eventually be interpreted, the changing of price-codes is advisable. Good use may be made of price code books.

Merchandise to be individually marked is usually done so by the hand-marking method, which makes use of gummed labels, pin-on tickets, clip-tickets, or writing the information on the merchandise itself. In some cases the information may be applied by rubber stamping, or electric or hand-operated machines.

As to merchandise which is to be bulk-marked, the retail price and other necessary information should merely be written on the outside of the container. This method is used primarily for fast-selling merchandise and items changing price rapidly.

Certain types of drug-store merchandise do not require marking at all, and the goods may be placed immediately on pre-marked shelves, tables, or in bins.

Regardless of the type of marking system or device used, the marking on drug-store items should be legible, neat, accurate, and accomplished without injury to the merchandise.

This information plays an important role; it serves as a "silent salesman," and is an aid in maintaining good consumer relations by preventing the quoting of misinformation to customers.

# Pharmacy in the 16th and 18th Centuries

(Reprinted from "The Pharmaceutical Journal," December 25, 1954.)

By J. M. Rowson, Ph.D., M.Sc., F.P.S., F.L.S.

The 16th and 18th centuries have been chosen for the present study, because in the 16th century appear the beginnings of a clarification of matters pharmaceutical and medical; the 17th century has been fairly extensively studied, but the 18th century is somewhat more conflicting and the system of development is less certain.

In 1511 is found the first regulation made governing the practice of Medicine in London. Linacre (1460-1524) was the Royal Physician of Henry VIII. He had noted that medicine was engaging the attentions of illiterate monks, often with the connivance of their Bishops, and of charlatans and empirics. Doubtless it was he who prompted the King to regulate the practice of medicine and surgery in the City of London, or within seven miles of it, so that it was limited to "those who had been first examined, approved and admitted by the Bishop of London or the Dean of St. Paul's, assisted in the examination by four doctors of Physic and of Surgery or other expert persons in that faculty." Graduates of the Universities of Oxford and Cambridge were exempted from such examination. It was Linacre who in 1518 obtained from Henry VIII letters patent for the establishment of a Body of Regular Physicians, which in 1551 became the Royal College of Physicians of London.

## Barber Surgeons.

The Barber Surgeons of England appear to have been grouped into guilds as early as the 14th century, and it is believed that some twenty or thirty of such guilds occurred in different important towns of the Kingdom. Unfortunately no records exist of this organisation, and the pattern is not clear until the 16th century. Thomas Vicary (1495-1561), appointed Chief Surgeon to Henry VIII in 1535, obtained from the King in 1540 the Royal assent to a union of the guilds of Barber Surgeons and Surgeons. It was then declared that the surgeons should no longer be barbers, and that barbers should be restricted from performing any surgical operation except the drawing of teeth. This new company was empowered to impose fines on unlicensed practitioners in London, and was entitled to have two bodies of executed criminals each year for the study of anatomy.

Throughout the 16th century the apothecary appears to be a thriving professional man. It may be that he was regarded as the assistant to the physician throughout the whole of the century. The College of Physicians had power to oversee the Apothecaries' wares, and thus, in 1540, they were given authority "to search, view and see the apothecaries' wares, drugs and stuffs." In 1553 these powers were set out more specifically; four members were authorised "to survey and examine the stocks of Apothecaries, Druggists, Distillers and Sellers of waters and oils, and preparers of chemical medicines." Urdang draws attention to the wide range of persons subject to this authority. There were four separate categories: druggist, distiller, chemist and apothecary. The field of chemistry, although in its infancy, was beginning to broaden, and the search for chemical medicines was in the ascendancy. Throughout the 17th and 18th centuries the trade in chemicals and chemical medicines developed as a separate business, the chemists being a class of men who prepared mineral compounds for the use of the apothecaries.

Bullevyn, the apothecary to Henry VIII, was the author of a "Book of Simples," well known throughout the

century. It was he who defined the apothecary and his shop as follows:—

"The Apothecary must serve God. He must foresee the end, be cleanly and pity the poor. His place of dwelling and shop must be cleanly, to please the senses withal. His garden must be at hand with plenty of herbs, seeds and roots. He must read Dioscorides. He must have his mortars, stills, pots, filters, glasses, boxes clean and sweat. He must have two places in his shop, one most clean for physick and the base place for chirurgic stuff. He is neither to decrease nor diminish the physician's prescriptions. He is neither to buy nor sell rotten drugs. He must be able to open well a vein, for to help pleurisy. He is to meddle only in his own vocation, and to remember that his office is only the physician's cook."

The following is a formula from Bullevyn's "Book of Simples" for an Electuary of Precious Stones:—

"Take two drachms of white perles; two little peeces of saphyre; jacinthe, corneline, emerauldes, granettes of each an ounce; setwal, the sweat root doronike, the rind of pomecitron, mace, basel seede, of each two drachms; redde corral, amber, shaving or ivory, of each two drachms; roots of both white and red behen, ginger, long pepper, spicknard, folium indicum, saffron, cardamon, of each one drachm; troches of diarodon, lignum aloes, of each a small handful; cinnamon, galinga zurubeth, which is a kind of setwal, of each one and one-half drachms; thin peeces of gold and sylver, of each half a scruple, musk, half a drachm."

From a study of the early roll of the College of Physicians, it appears that the majority of its members were graduates of the Universities of Oxford or Cambridge; such graduation would be essentially in the classics. The physicians' prescribing was based upon Dioscorides, Galen and others, as modified by the Arabian school. Hence throughout the 16th century, and, indeed, well into the 17th century, the drugs and preparations were largely those of classic times.

The first English book of paediatrics was published in 1545 by Thomas Phaer (1510-1560). "The Boke of Children" contained many prescriptions; the following is of interest "to procure easy breeding of teeth, anoint the gummes with the braynes of a hare mixed with capon's grece and honey." The literature on drugs in this century is represented by Turner (? to 1568), whose "The New Herball," published in 1548, was the earliest scientific work on botany in the English literature. Turner, a student of theology and medicine in Cambridge, lived for many years in Germany, and without doubt his Continental experience led to this great work. It was he who was instrumental in the founding of Kew Gardens. Gerrard (1545-1607) was a London surgeon, who was the author of "The Herball," 1596. Although belonging to the next century, Parkinson (1567-1640), was a London apothecary who was also the Director of the Royal Gardens of Hampton Court, and was the author of "Theatrum Botanicum," 1640.

## Results of Exploration.

The 16th century was one of exploration and discovery. From these discoveries there came into Europe and into England a number of new drugs. One of these was Winter's Bark, discovered by Captain Winter, in charge of one of the three boats led by Drake in his voyage around the world. He made use of it as a spice

and medicine for scurvy during his voyage to England (separated from Drake), where he arrived in 1579. Other drugs from the American Continent were guaiacum, logwood, balsam of tolu and sarsaparilla. A number of references in the literature of Europe referred to guaiacum from 1514 onwards. It was considered one of the sovereign remedies for the cure of venereal disease that so suddenly appeared and was so rampant throughout Europe in the 16th century.

Cassia fistula was a popular remedy, and was referred to by Turner in 1568. Gerrard notes the widespread use of capsicum, which he states is sold in the shops at Billingsgate, by the name of Ginnie pepper. Although not used therapeutically in a critical manner until the 18th century, digitalis leaf was administered in this century, and is described by Parkinson.

The 18th century opens with the apothecary fully organised in the Society of Apothecaries of London; as an influential and wealthy man seeking the best of both worlds by trying at the same time to be pharmacist and physician. In 1617 the physicians had petitioned James I to incorporate the apothecaries separately from the Company of Grocers, and a charter was granted founding the Company of "Masters, Wardens and Society of the Art and Mystery of Apothecaries of the City of London." They were granted a monopoly of keeping an apothecary's shop, rendering it unlawful for grocers and any person to make or sell, to compound, prepare, give, supply or administer any medicines, etc., within the City of London or the suburbs or within seven miles of the City. Throughout that century the Society of Apothecaries had developed, and they had founded the Apothecaries' Hall, in which their manufacture of galenicals and chemicals took place. Those products were not only for the supply of the members of the Company, but were sold by contract to the Navy, the East India Company, etc. The Society of Apothecaries had also struggled against the physicians to defend their right not only to compound prescriptions, and to apply these preparations to the patient, but also to act as prescriber. In 1703 the apothecaries were victorious, for a decision of the House of Lords recognised them as medico-pharmaceutical practitioners.

#### Preparation of Galenicals.

Throughout the 17th and 18th centuries there appeared to exist druggists, chemists and distillers, although little is now heard of the distillers as serious participants in the art of pharmacy. In the 18th century there are records of a number of unsuccessful attempts by the Society of Apothecaries to defend their rights as compounders of pharmaceuticals. It would seem that throughout the century the druggist and the chemist not only prepared the drugs and chemicals, but made the galenicals and compounded physicians' prescriptions.

An additional complicating factor in this troubled period is the establishment by the College of Physicians of their own dispensaries, three in number. The apothecary had increased in stature and in wealth; he had achieved the right to practise medicine as well as pharmacy, and he sought to establish his domain in both realms. The physicians counter-attacked by the establishment of their own dispensaries, at which prescriptions were dispensed at cost price. These were obviously successful, and it is claimed that as many as 20,000 prescriptions per annum were dispensed, alike to the poor and to the rich.

Redwood suggests that there is reason to believe that the assistants employed and instructed by the physicians at these institutions became dispensing chemists on their own account, and that some of the apothecaries who found their craft in danger followed their example; from which source we may date the origin of the "Chemists and Druggists." I believe that Redwood is unduly dogmatic in this statement. It is clear, however, that the apothecary during the 18th century became more and more the physician, and although guarding jealously his pharmaceutical rights, he had largely

abandoned that aspect of his work. Thus there is no continued evolution from the Society of Apothecaries to the pharmacist of today.

It is equally clear that at the end of the 18th century and in the early 19th century there was a great increase in the number of druggists, or chemists, or people practising the art of the apothecary in regard to the sale and compounding of drugs. Apothecaries were perturbed, and in 1793 an inquiry was instituted into the defects and privations existing amongst them; which arose, as they said:

"from two grand causes:—First, the encroachment which chemists and druggists have of late years made on the profession of the Apothecary by vending pharmaceutical preparations and compounding the prescriptions of physicians. Secondly, the want of a competent jurisdiction in the profession itself to regulate its practice, and to restrain ignorant and unqualified persons from practising at all."

The same inquiry regarded the development of the druggist as a spreading contagion that:

"from the larger cities and towns it was beheld propagating itself to the smaller cities and towns, till at length so general was the disease there was scarcely to be found a village or hamlet without its village or hamlet druggist. If the sale of medicines and the giving of advice was not here sufficient to support the vendor, he added to his own occupation the sale of mops, brooms, bacon, butter and a thousand such articles besides."

In order to put an end to these abuses, it was proposed to form a General Association of the Apothecaries of Great Britain, who should engage to deal with such druggists only as would immediately consent to relinquish the composition of all medicinal prescriptions, to retain to themselves the wholesale occupation alone, and to receive no apprentice and employ no assistant who had not had a classical education.

This new association as an offshoot from the Society of Apothecaries reported that there had been a four-fold increase in the number of druggists in the space of ten years, "but Pharmacy alone comprises too small a field for these men of letters and ambition. They prescribe whenever applied to, they are totally ignorant of medical science, and even pretend to reduce fractures." It would thus seem clear that a growing tradition of the dispensing chemist or the dispensing druggist was establishing itself as the apothecaries devoted more and more of their attention to medical and surgical practice.

The nature of pharmacy and the business conducted is fairly clearly recorded. The picture, appearing in a contemporary magazine, "The Universe," 1747, shows the inside of an apothecary's laboratory, as distinct from his shop; apparatus for distillation is the dominant equipment, and some odd skins of reptiles form the decorations. No. 2 Plough Court is perhaps most widely known as an early 18th century apothecary's shop, founded in 1715 by the apothecary Sylvanus Bevan, with shop, laboratory, house and garden all giving evidence of a well-to-do business man of standing and repute. Without doubt the range of other practitioners of the art of pharmacy, the dispensing chemist, the dispensing druggist, the manufacturing chemist, etc., were all to be found, but perhaps not with the old glory of the art of the apothecary.

#### Elimination of Worthless Drugs.

Although no great advance in pharmaceutical thinking can be recorded throughout the century, there was a gradual weeding out of the horrible and the worthless in the realm of *materia medica*; the polypharmacy of many of the galenicals was to some extent reduced, although much still remained. Of the literature, we may quote Bates (1688), Salmon (1693), Quincy (1718), onwards. The London Pharmacopoeia, founded in 1618, passed through several editions in this century, commencing with the 4th edition, 1721. The first Edin-



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Quincy's volume is divided into two main divisions. Part I, The Theory of Pharmacy, describes the various processes of extraction and preparation of drugs and chemicals. It contains tables of specific gravities of liquids and solids; of quantities of acids necessary to saturate different absorbents and absorbent earths, etc. About 500 vegetable drugs, 69 animals drugs and 61 mineral preparations are tabulated and discussed. Part II, The Practice of Pharmacy, tabulates preparations of simples of salts and of metals. It lists official compositions, and its final section describes extemporaneous compositions. In this section Quincy gives some guidance in prescribing. Among other things, he advises that all extemporaneous medicines should be as "elegant and pleasant as possible, also in the smallest doses practicable."

The use of the microscope is referred to by Quincy. "The essential oils . . . are collected in little membranous viscicles. These are readily discovered by the microscope in the rinds of oranges and lemons, in juniper berries, nutmegs, the roots of elecampane, master-wort, spignall, angelica, fennel, Florence orris and others." A hint of the division between the apothecary and the chemist is seen in the reference to Fixed Salts. It was the custom to make use of the ashes derived from different medicinal plants, computing therapeutic efficacy to the different products.

A very modern hint is found in the reference to Powers (Potestates):

"There is a form of preparation, which Salmon chiefly introduced for the sake of his brother Empirics, and those who were for cutting the shortest way to profit, called Potestates, or Power. This is an incorporation of the essential oil of any vegetable with spirit; by the intermediation of Sal Armoniac; and this was chiefly designed for the extemporaneous making of waters; for with a small quantity of such medicines and common water, there was always in readiness whatsoever of that kind could be called for. The Elaeosacchara likewise have been contrived for the same purposes. These are a mixture of an essential oil with sugar, which will dissolve in a strong spirit, and to make, on a sudden, without the help and expense of a still, either cinnamon, orange, or any other water that is required. So that by these

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Amongst the new drugs added to the Pharmacopoeias during the eighteenth century are aconite leaf, arnica root, bearberry leaf, castor seeds and castor oil, digitalis leaf, mustard seed, peppermint herb, quassia wood, and senega root. The number of galenicals which find a place in the pharmacy of the present century, and which were introduced in the eighteenth century, are far too numerous to name, other than a few examples; compound liquorice powder, aromatic spirit of ammonia, paregoric elixir, and compound rhubarb powder.

(Passages from an address given by the author to various Branches of the Society.)

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# The Women's Section

Correspondent: Miss A. K. Anderson

I would like to remind the Secretaries of State Associations that all contributions for this section of "A.J.P." must reach me by 14th of each month. Reports received after that date have to be held over till the following month.

## WOMEN PHARMACEUTICAL CHEMISTS' ASSOCIATION OF VICTORIA

Our annual meeting was held at the College on May 19, which date proved to be an unfortunate choice, as it was the coldest and wettest night we've had this year, and few members attended.

The President, Miss J. Caird, welcomed those present, and after the usual business, the election of the Committee for 1955-56 took place, resulting as follows:

**President:** Miss Freda Smalley.

**Vice-Presidents:** Miss J. Caird, Miss K. Keogh.

**Hon. Secretary:** Miss A. Anderson.

**Asst. Secretary:** Miss I. Maskell.

**Treasurer:** Miss R. MacGillivray.

**Committee:** Mrs. I. Thompson, Mrs. Ross Carter, Miss M. Murrell, Miss G. Donaldson, Miss J. Reilly, Miss N. Cornu.

After a short discussion on plans for forthcoming meetings, those present adjourned to the museum for supper.

In the absence of the President, Miss F. Smalley, who had not sufficiently recovered from her recent illness to attend, the Vice-President, Miss J. Caird, welcomed a large number of members to the general meeting on June 9.

Introducing our guest speaker, Dr. Stan Wigley, of the T.B. Research Bureau, Department of Health, Miss Caird said that as Dr. Wigley had qualified as a Ph.C. before doing his medical course he was quite at home at the College.

Dr. Wigley gave us a most interesting talk on the control and treatment of T.B., and by a series of slides showed figures and graphs that proved how greatly the death rate has been reduced over the years. In the olden days, T.B., along with many others, was classed as a "wasting" disease, and was believed to be contagious as far back as the 4th century. Until recent times the death rate from T.B. was high, mainly because the average person could not afford to be unemployed for the long period necessary for treatment, and so, without seeking medical advice, worked until he was no longer able to carry on, by which time the disease was incurable. Since the advent of Social Service the T.B. pension is adequate to provide for the sufferer and his dependants. From 1947-1953 the fall in the death rate in T.B. had been miraculous. It will be very difficult to reduce the mortality rate any further for a number of years, and until the over 40 age group with the long standing active T.B. have died, no change can be expected. The voluntary X-ray has done a great deal towards helping to lower the figures, as many cases have been discovered in the early stages, but Dr. Wigley pointed out that it was not the unqualified success that most people thought. It was voluntary, and only about 70 per cent. of the population—the same 70 per cent. each year—were X-rayed. It was possible that in the other 30 per cent. of the com-

munity there was a higher percentage of T.B. The discovery of the antibiotics had been of tremendous help, and the use of Streptomycin, P.A.S. and Isoniazide had done a great deal towards shortening the period of treatment. Despite the fall in the death rate the morbidity rate had not fallen at all over the past years, though there are indications that the peak of morbidity has passed, as the demand for sanatorium beds is falling. Dr. Wigley stressed the importance of sanatorium treatment, where the patient is under observation all the time, has no outside worries to contend with, and quickly becomes accustomed to the regular routine, which is so necessary.

Miss R. MacGillivray proposed a vote of thanks to Dr. Wigley for a most interesting talk, and the evening finished with supper served in the museum by the committee.

## THE ASSOCIATION OF WOMEN PHARMACEUTICAL CHEMISTS OF NEW SOUTH WALES

This year the committee of our association decided to make a departure from the custom in previous years and hold a dinner in June instead of the Annual Ball. Recent balls have not been representative of the association, and it was felt that more members would prefer to attend a dinner. Miss Mavis Sweeney, the President, was therefore very pleased to welcome some



Miss Esme Brown proposing a toast.

forty to fifty members on the evening of June 2, to the Holme and Sutherland Rooms, Sydney University, where the dinner was held. Judging by the attendance we hope that this will be the forerunner of other similar occasions. Many members met friends from their own university days, and the general buzz of conversation was to be heard above all else. Cocktails were served at 7 p.m., and dinner a little later, cards indicating each guest's place, while flowers decorated the tables.

The first toast was to Her Majesty the Queen, and this was proposed by the President, Miss Sweeney.

Mrs. Webber was then called upon to propose a toast to the Association, which, as she said, is very dear to all of us. This toast was replied to by Mrs. J. Curtis, who is a past president of the Association.

The third and final toast was a most unusual one, entitled "a toast to those who have travelled and those who intend to travel," proposed by Miss Esme Brown, who is considered to be one of the most travel-



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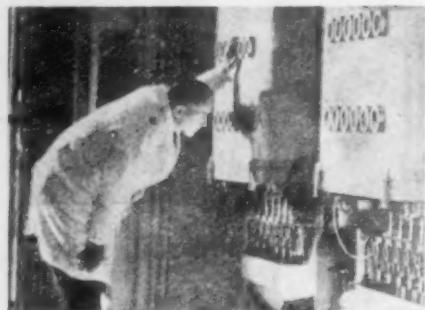
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led members of the Association. Miss Brown spoke of her recent visit to Canada, and of the difficulties which confront Australians wishing to register in our Sister Dominion.

This toast was replied to by another much-travelled member, Miss Bessie Wunsch, who earlier this year returned to Australia after spending two years abroad.

Both these speakers added coal to what appears to be that fiery occupational disease among pharmacists in general. Some of us have had opportunities to travel beyond our own little world, and those who have tra-



Miss E. Wunsch replying to a toast.

velled far and away realise that the experience and thrills of this exciting pursuit enhance the delight of the return to the land of our birth.

A delightful announcement was made before the evening came to a close, and that was of the birth of a third son to Mrs. Fairfax, our Immediate Past President. Congratulations, Dorothy!

We would like to see all those present at the dinner at our future monthly meetings, and a friendly welcome is assured to all women pharmacists who attend.  
—Evelyn Tasker, 159 Dover road, Dover Heights.

#### THE ASSOCIATION OF WOMEN PHARMACEUTICAL CHEMISTS OF QUEENSLAND

Our President, Miss Everett, opened the general meeting held in the Lyceum Club Rooms, on April 21, by expressing how pleased we all were to see Mrs. McClelland and Margaret both well again.

General business was discussed and best wishes extended to Mrs. Gibson for success in her new pharmacy out at Witton.

Two other points of interest included the engagement in England of Miss Adele Thomas to Dr. David Kaye, and the marriage on Easter Monday of Miss Margaret Baxter to Mr. Ron Belcher, B.Sc.

In order to attract more members to our monthly meetings it was decided to elect a publicity officer, the position being gladly accepted by our Vice-Secretary, Miss Tomlinson. As there was a vacancy on our Committee, the co-option of a new member was considered in Miss Ploetz, who expressed her pleasure in accepting the position.

It was proposed by our President that a subscription

be made towards a memorial to the late Miss Underwood, the instigator in forming our Association.

On June 2 we have planned a theatre party to the Borovansky Ballet, and hope that some members of the Society will join us in the expedition.

The meeting closed at 9 p.m., and supper was served, after which Mrs. Stirling showed us some picturesque and interesting slides of her travels through Venice, Greece, Turkey, Arabia and India, thus bringing the meeting to a delightful close.

#### THE WOMEN PHARMACEUTICAL CHEMISTS' ASSOCIATION OF SOUTH AUSTRALIA

On May 26, at 7 p.m., members visited the Red Cross Blood Centre, East Terrace, Adelaide, where we were welcomed by the Director, Dr. Elizabeth Prest.

Dr. Prest spoke to us about the Blood Centre at one of our meetings last year, and at that time she suggested that we should make such a visit in order to see at first hand the work being done by this splendid organisation. We were fortunate in being able to see the donors giving blood, and we were taken into the laboratory where we watched the technicians grouping samples of blood.

We found Dr. Prest and the members of her staff untiring in their efforts to show us every aspect of the work done at the Blood Centre, and we are indebted to them for a most interesting evening.

On Tuesday, June 21, members will be visiting Mrs. Hewitt's home at Trinity Gardens, where we are to see an exhibition of her beautiful tapestries and other works of art.

#### THE WESTERN AUSTRALIAN WOMEN PHARMACISTS' ASSOCIATION

The annual general meeting, which was held on March 22, in the Pharmacy Lecture Room of the Perth Technical College, resulted in the election of the following office-bearers:

**President:** Miss E. Gray.

**Vice-President:** Miss V. Garcia.

**Secretary:** Miss Tess Sheedy.

**Treasurer:** Miss E. Millar.

**Committee:** Miss Jean Hill, Mrs. E. Adlard, Mrs. G. Lucraft and Mrs. Hunter.

**Associate Committee:** Fourth year, Miss L. Einihovici; third year, Miss M. Rumpfey; second year, Miss M. Whittle; first year, Miss E. Fraser.

Suggestions for the programme were received and members are promised a most interesting year. Miss Gray has invited members to an afternoon at the Adelphi Hotel on May 21, for the first social function of the year.

A most enjoyable function was the afternoon tea party given by the President, Miss Eula Gray, at the Adelphi Hotel on May 21.

Thirty-five members were present, and Miss Gray welcomed new associates. Quite a few generations of members renewed acquaintance over the tea cups. Miss Harris read a letter from Miss Witt, relating to Section "O" of the forthcoming Science Conference. Mrs. Ruth Baird provided entertainment with two monologues, which were greatly appreciated. Prizes for hidden numbers were won by Mrs. Lucraft and Mrs. Adlard.

## New Books

### The Alchemist Glossary of Medical Terms (First Series)

Published by Thomas Waide and Sons Ltd. (publishers of "The Alchemist"), Kirkhall Hill, Leeds, 5. English Price, 9/6 (including postage) from the publishers.

Originally published in monthly instalments in "The Alchemist," and now brought together in booklet form, the subject-matter of "The Alchemist Glossary of Medical Terms" forms a "pocket" type of medical dictionary of a rather unusual character.

The preface and list of contents is followed by a section devoted to "Deducing the Meaning of Medical Terms," which includes an alphabetical list of the more common prefixes, suffixes and root words from which many medical terms are built up. Then follows a section on "Some General Medical Terms." Both these sections should be helpful to those not familiar with medical terminology.

The most important and most frequently used medical terms are then arranged in groups under the following subject headings:

- Cardiovascular diseases.
- Diseases of the kidneys and urinary tract.
- Diseases of the digestive system.
- Some common skin affections.
- Infectious diseases.
- Diseases of the bones, joints, etc.
- Diseases of the blood.
- Endocrine gland disorders.
- Veneral diseases.
- Diseases of the nervous system.
- Gynaecology.
- Obstetrics.
- Psychiatric conditions.
- Non-infectious respiratory conditions.
- Tuberculosis.

Some sections include diagrams to assist in the explanations of the terms.

The booklet is firmly bound in cloth and includes a comprehensive index enabling any term to be readily found.

In the study of medical and pharmaceutical literature this little book should be of considerable assistance to pharmacists, and medical and pharmaceutical students.—E.M.W.

### BAN ON HEROIN

#### B.M.A. Council Discussion

At a meeting of the Council of the British Medical Association held in London on April 13, the Government's ban on heroin production (see C. & D., February 26, p. 224) was discussed. Dr. R. Hale-White described the Government's action in banning the drug without discussing the matter with the medical profession as effrontery. Mr. Lawrence Abel urged that the matter should be taken up with the Ministry of Health by the General Medical Services Committee. Dr. S. Ward said that, as a member of the Medical Advisory Committee concerned, he had thought originally that the ban was uncalled for, but having heard the arguments, and knowing from his personal experience that there were drugs that replaced heroin adequately, he was persuaded that if Britain stayed out of the international agreement it would intensify a grave international problem. During the past six or eight years a number of pain-relieving drugs had been introduced which had led to the lessened use of heroin. The Council agreed to inform the Government of the views expressed.—Extract from "The Chemist and Druggist," April 30, 1955.

## Readers' Views

To the Editor.

These columns are open for the free discussion of any matter of general interest to Pharmacists. Letters under a nom de plume may be published; but each correspondent must furnish his name and address as an evidence of good faith. It must be distinctly understood that the opinions expressed by our correspondents are not necessarily endorsed editorially.

### APPRECIATION OF ADDRESS

Sir,—I wish to compliment Dr. Byron Stanton on the "then" of his address "Then and Now," in May's edition of the "A.J.P."

It took me right back to 1895, when in June of that year I was apprenticed to Mr. C. L. M. Bourdic, of Spencer street, on the same conditions regarding salary and hours as Dr. Stanton stated, plus £100 premium, kind of out on bail money, which would be forfeited if I absconded during the four years.

I qualified in December, 1900. Mr. Bourdic being also a dentist, and no laws then as to qualification in those times, under his tuition, when I left I was quite a capable surgeon dentist, and later I was recorded and then registered.

After those strenuous days of apprenticeship, I longed for free life and fresh air, so in the latter part of 1901 I went before the mast on a sailing vessel as ordinary seaman, but on reaching our destination (Liverpool) I found that most of the journey had been spent in the role of ship's dispenser and extracting teeth. However, I spent two weeks at the captain's home, and then went by train to London, where I did temporary pharmaceutical work in East and West End and occasionally in the counties. The wages were appalling, not much better than my 4th year's apprenticeship wage, as the British Pharmacy Board would not recognise my qualification. After 12 months' stay, I returned home, and carried on a business in Mildura for 22 years, then did relieving work in various country towns in Victoria. Now I have practically retired, only taking temporary positions. Several of my apprentices are now in business in various parts of Victoria, and both my sons and also a daughter-in-law are still carrying on the good work—one son in Carnarvon, W.A., and the other and his wife in Suva. I cannot speak too highly of the wonderful treatment during my career that the Pharmaceutical Society has dealt out to me.—Yours, etc.,

FRED STONE.

40 Bay street, Brighton, Vic., June 16, 1955.

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—Walker, Craydon L.: "A Pharmaceutical Third Dimension," North Western Druggist 62:27 (Dec. 1954).

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# Overseas News

## GREAT BRITAIN

London, June 10, 1955.

### Sir Hugh Linstead Returned to Parliament

At the General Election on May 26, Sir Hugh Linstead, joint Secretary of the Pharmaceutical Society, was returned as Conservative member of Putney with an increased majority of approximately 1000 votes. Sir Hugh has represented this constituency since 1942. The only other pharmacist in the new House is Sir Wavell Wakefield, who sits as Conservative for another London constituency. Two other pharmacists were unsuccessful at the polls.

### Commemoration of New Constitution

The principal event in May was the reception held by the Society at the headquarters of the Royal Institute of British Architects to commemorate the new constitution of the Society. At a private ceremony during the evening His Royal Highness the Duke of Edinburgh was presented with the certificate bestowing upon him the honorary fellowship of the Society. The President of the Society, Mr. E. A. Brocklehurst, recalled that the Society had received its first Royal Charter from Queen Victoria over a century ago, that King George VI had granted them a Supplemental Charter in 1948, and Her Majesty Queen Elizabeth had honoured the Society by granting them a new Charter in 1953, and it was on this Charter that the revised constitution of the Society had been based.

After this ceremony the Duke visited an exhibition which had been staged at his request to illustrate the contributions made by the pharmaceutical industry to medical science. Specimens were arranged below a series of 20 descriptive panels, on which were displayed a short history of the type of preparations shown, their therapeutic possibilities and the forms of administration. The panels ranged from the manufacture of galenicals through various complex chemicals used as antihistamines and in tropical diseases, by way of insulin and anaesthetics to vaccines and sera. The last-mentioned display included some ampoules of British-made anti-poliomyelitis vaccine. The display, which was organised by the Association of British Pharmaceutical Industry, will be on view during the General Assembly of the International Pharmaceutical Federation in London in September.

### Council Affairs

The May pharmaceutical calendar also included the Council Election, the Annual Meeting of the Society, and the Branch Representatives' Meeting. At the Election, six of the seven retiring candidates were returned, with Past President W. J. Tristram at the head of the poll. He received 6838 votes, which is the highest recorded for over twenty years. This year under 37 per cent. of members voted. This is the lowest percentage for many years. In 1939 the figure reached was 45.3 per cent. The new member is a retail pharmacist, Mr. M. Jackson, of Leeds, who replaces Miss M. Islip, a hospital pharmacist. The Council has now only one woman member, Miss Burr, whereas a few years ago the number was three.

The Annual Meeting was most uneventful, as only around sixty members were present. Discussion on the Annual Report was short, but it was revealed that the Poisons Board was considering the position of methyl-pentynol.

### The Branch Representatives' Meeting

On the day following the Annual Meeting, the first Branch Representatives' Meeting, attended by over 250

members, was held to consider 16 motions submitted by various branches. Considerable disquiet was expressed at the number of poisonings among children, who had been allowed to lay hands on medicines intended for adults. Finally, it was agreed that the Ministry of Health should be pressed to inaugurate an educational campaign to teach the public that all medicines should be kept out of reach of children.

Some time was spent on the discussion of the duties and status of the superintendent pharmacist in a one-man company. The Statement on Matters of Professional Conduct lays it down that a pharmacist should not take such a position unless he is allowed to take over the full duties of a superintendent. Finally, it was agreed that the Council should issue a memorandum amplifying the relevant section in the Statement.

A great deal of heat was engendered in the discussion on hours of opening. In many areas pharmacists do not adhere to the hours of opening agreed with the local executive council, and many members were of the view that late opening should be considered a breach of professional etiquette. A motion to this effect was carried, with the proviso that any joint action by pharmacist contractors to provide extra necessary service should not be so regarded.

A motion suggesting that the Society should have power to refuse to register premises as new pharmacies was turned down. The Council was also asked to give consideration when formulating its educational policy to the need for post-graduate training and the award of diplomas in such subjects as veterinary pharmacy and the fitting of surgical appliances. In addition, the Council was asked to ensure that an annual survey of students was made to determine if they were still proceeding towards a pharmaceutical qualification.

### Growing Opposition to Ban on Heroin

As indicated in last month's Newsletter, some opposition had arisen among members of the medical profession to the proposed ban on heroin. This has now become an issue between the British Medical Association and the Government. At the annual representative meeting in London last week, the council were instructed to seek direct access to the Government to obtain a reversal of the decision. The motion passed by the meeting states that the drug is of inestimable value, and that it should be manufactured for use by medical practitioners, but not exported. It was clearly brought out that the rank and file of the profession had not been consulted, but one member of the council stated he had been present when the ban was discussed. This representative, Dr. E. A. Gregg, of London, according to "The Times" report, said: "I have to admit that in the discussion the dreadful picture of heroin addiction made such an impression on us that we did feel that the small sacrifice which might be involved in our forgoing having it at our disposal was a very small sacrifice compared with the advantage that would come from heroin not being available. It is entirely wrong to say that those of us who are on that committee are on it as representatives from the B.M.A. I feel that it is most regrettable that the B.M.A., as an association, was not consulted, and had no opportunity of circularising divisions, so that there might be obtained opinion from doctors thoroughly representative of the profession regarding the use of this drug."

"The Times" has published at least two letters on this question, and in one of these, members of the teaching staff of the London University College Medical School point out that it is well known that the manufacture of heroin from crude morphine is mere child's play. Simple apparatus in a kitchen or bathroom, where a source of heat is available, fill the requirements of the illicit manufacture.

At the B.M.A. Conference, a member said that in his surgical practice he had found no drug to equal heroin during the first two or three days, particularly after

an abdominal operation, or one capable of producing the same tranquillity of mind and ease of wound.

#### Strike Conditions

A strike of railway drivers and firemen began at the end of May. This naturally partially paralysed the transport system, and in consequence the Government decreed that the post office should not accept packets weighing more than 8 ounces. Country chemists who obtain small orders by post have been badly hit, and chemists in the towns have struck an unexpected difficulty. At the beginning of each month prescriptions are sent to fourteen bureaux for pricing, and very few of these are situated near the chemist. One of the greatest difficulties has been experienced by the chemists of London and Middlesex, who may together dispense up to three million prescriptions in a month. These are despatched during the first three days of every month to pricing offices 300 miles away at Newcastle-on-Tyne. To meet the needs of these chemists, the London and Middlesex pharmaceutical committees set up receiving stations spread throughout their administrative areas, and hired road transport to convey the bulky parcels. At the time of writing no complete report has been received on the success of this work, but first indications show that fully half the chemists have taken advantage of this service. The remainder have split up their bundles into packets weighing under eight ounces, and despatched them by post, and some of the company chemists made their own arrangements.

So far the strike has not affected chemical manufacturers, but exports are being held up, as in addition to the railway strike many dock workers are having a strike of their own.

#### The Drug Bill

Accounts issued by the Ministry of Health and the Department of Health for Scotland for examination by Parliament show that total payments to contractors for the year ended March 31, 1954, amounted to £49.78 million. This is approximately £1.4 million less than in the previous year, but this apparent decline is due to the pricing offices catching up with arrears in the earlier year, with the consequence that more than twelve months' bills were paid to some chemists in the period. In addition, in 1953-54 doctors received £1.79 million for drugs and dressings supplied direct to their patients. The Ministry broke down the total sums paid to pharmacists into the following values:—Dispensing fees £12.75 million, ingredient cost £28.57 million, on-cost £7.17 million, and containers £1.3 million. To obtain these sums, chemists dispensed approximately 249.6 million prescriptions. In England and Wales payments to pharmacists have risen from £29.96 million in 1949-50 to £44.21 million in the year under review, although in 1952-53 the figure was £45.65 million. With the increased range of antibiotics, now prescribable under the Health Service, it seems likely that this year's figures will reach a higher peak.

#### Negotiations with the Ministry

The Government Actuary has now agreed that the 525 usable replies received from pharmacists in England and Wales in response to the questionnaire on dispensing costs form an adequate sample of conditions throughout the country. At least six months must elapse, however, before discussions can be completed between the contracting parties. At present there is an allowance of one farthing per form made to chemists as compensation for cases in which the levy of one shilling per form from the public has not been collected. This figure was based on the view that the average rate of loss would be one in 48 prescriptions. It now appears that the figure averages one in 160 forms, so that it is possible that a cut will be made in this allowance. Negotiations are at present being undertaken on the suggestion put forward by the Ministry that for about 300 proprietaries it should be

assumed by the pricing office that they had been bought in bulk, unless the contractor indicated otherwise.

#### Anti-poliomyelitis Vaccine

According to Atticus, the columnist in the "Sunday Times," Mr. Michael Perrin, Chairman of the Wellcome Foundation, has stated that the successful vaccine against poliomyelitis may differ from that developed by Dr. Salk. The Salk vaccine requires an almost limitless supply of rhesus monkeys, but the Wellcome experiments are trying to develop the vaccine on egg tissue, so that monkeys are not required.

#### Advertising Codes

Recently Miss P. Hornsby-Smith, Parliamentary Secretary to the Ministry of Health, referred to the advertising of pharmaceutical preparations in the course of an address at the conference of the Advertising Association. After having paid a tribute to the way in which the Newspaper Proprietors', the Advertising and the Proprietary Associations tried to enforce codes of standards, she said: "There are some black sheep who do not abide by the spirit as well as the letter of the Code, and who do not belong to these great associations; it is very reprehensible when they print undesirable advertisements which cast a slur on the high reputation of the industry as a whole. Thus, the self-discipline represented by the Code and voluntarily entered into is one of the most valuable forms of protection that the public could have."

In your correspondent's opinion, it is only in local newspapers and occasionally in a Sunday paper that any undesirable advertisements appear. Voluntary control has been effective.

#### Apothecaries' Measures to be Abandoned

A report of the Pharmacopoeia Committee of the General Medical Council, dated May 24, states that the apothecaries system of measurement is to be abandoned in the British Pharmacopoeia, 1963, and subsequent editions. The matter has been considered from time to time by the Commission, which had agreed that the apothecaries system should be eliminated from the Pharmacopoeia. The Commission feel, however, that reasonable notice should be given of the intention to use the metric system only, and that it would be premature to make the change as early as 1958, that is to say, with the publication of the next edition of the Pharmacopoeia. The earliest appropriate date for the change appears to be the year in which the 1963 edition is due for publication.

Monographs on corticotrophin, dextran sulphate and phenindione (phenylindanedione) have been prepared for inclusion in the Addendum, 1955. The Addendum will be published on Monday, October 3, and will come into effect on March 31, 1956.

#### B.P. Approved Names

The following nine Approved Names have been devised or selected by the British Pharmacopoeia Commission with the intention that if any of the drugs to which these names are applied should eventually be described in the Pharmacopoeia the Approved Name should be its official title. The issue of an Approved Name does not imply that the substance will necessarily be included in the B.P., or that the Commission is prepared to recommend the use of the substance in medicine.

Approved Name	Other Names
Chlorhexidine . . . . .	Bis- <i>4</i> -chlorophenyldiguanidohexane; Hibitane.
*Diethylthiambutene . . . .	3-Diethylamino-1:1-di-2'-thienylbut-1-ene; Thematlon.
*Dimethylthiambutene . . . .	3-Dimethylamino-1:1-di-2'-thienylbut-1-ene.
*Ethylmethylthiambutene . .	3-Ethylmethylamino-1:1-di-2'-thienylbut-1-ene.
Methyl Phenidate . . . . .	Methyl 1-phenyl-2-piperidylacetate. Ritalin is the hydrochloride.

# IODEX

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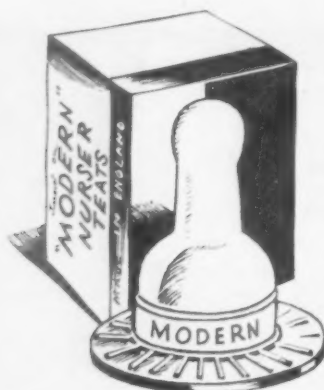
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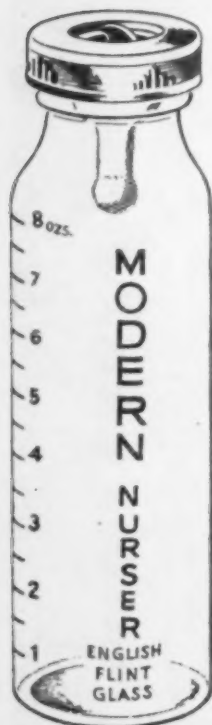


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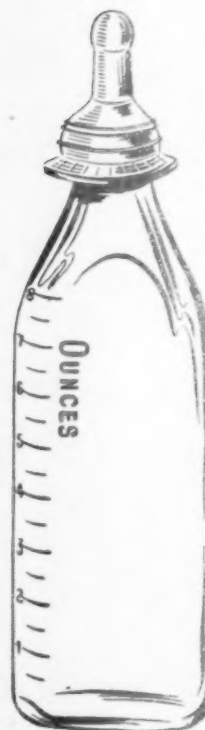
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Approved Name	Other Names
**Phenindione	2-Phenylindane-1:3-dione; Phenylindanedione; Dindevan
Polymyxin	Antimicrobial substances produced by <i>Bacillus Polymyxa</i> . (Specific substances are designated by a terminal letter; thus, Polymyxin E).
Streptonicozid	A compound formed by interaction of a suitable streptomycin salt and isoniazid; Streptohydrazid
Triprolidine	<i>trans</i> -1-2'-Pyridyl-3-pyrrolidino-1- <i>p</i> -tolylprop-1-ene. Actidil is the hydrochloride.

\* Not intended for use in human medicine; diethylthiambutene is of interest in veterinary medicine.

\*\* Replaces Penylindanedione as the Approved Name.

#### Attempted Suicide

The British Medical Journal recently reported the first known case of attempted suicide with Oblivon (methylpentynol) and Persomnia (a mixture of carbromal and bromvaletone), in a contribution from R. E. Lovelace and A. I. Roith. A soldier swallowed 25 capsules of Oblivon, equivalent to 6.25 gm. of methylpentynol, and about 75 tablets of Persomnia, equivalent to 15 gm. carbromal and 5 gm. bromvaletone, which had been purchased without a prescription from retail pharmacies. He was admitted to hospital in a comatose condition some nine hours after he started taking the drugs. Gastric lavage with sodium bicarbonate was carried out, and 20 mgm. of amphetamine sulphate was left in the stomach. General supportive therapy was begun, and he was started on intramuscular amphetamine. Four and a half hours later his coma had lightened, and by the following morning he was fully conscious.

The authors suggest that the possibility of an additive effect of the two drugs might be considered. They regard it as regrettable that members of the public should be able to purchase large quantities of methylpentynol without a prescription, in spite of the advice of the Society, and they note that, although there are no indications for placing special restrictions on the sale of Persomnia, it should be observed that purpuric eruptions have been caused by carbromal.

## SOUTH AFRICA

#### Removal of Price Control

Some chemists, however, find themselves severely handicapped in their attempt to trade. In Johannesburg one chemist was recently fined £62/10/- for overcharging—a simple enough thing to do on account of the most complicated system of price control; a relic of the war which has passed into history. However, it is heartening to read that at long last price control on pharmaceuticals has been removed. But heaven help the chemist who charges a halfpenny too much on a pair of scissors. He may regard them as surgical scissors, but the inspectors may class them as cutlery.

#### Plans for Building

The Pharmaceutical Society is still busy with its project to build a headquarters for itself in Johannesburg. The 2500 chemists of the Union have so far given £33,000, and with accumulated funds are going to begin building operations soon. The annual general meeting of the Council takes place in May this year in Johannesburg, and it is proposed to lay the foundation stone then. Soon the Council will be able to meet in its own

council chamber instead of a hired hall, and to create in South Africa another 17 Bloomsbury Square.

Given pride of place in this new building will be a bust of the late John Christie, chemist and member of Parliament for many a year. Currently no pharmacist sits in either House, although some interest in affairs pharmaceutical is shown by at least one member whose son is a chemist.

There has been talk of creating a School of Pharmacy in the new headquarters amongst some members who would like to see pharmacy in South Africa develop along the lines of Bloomsbury Square.

At present four Technical Colleges and one (Afrikaans) University give courses for the Diploma in Pharmacy. Some time ago it was proposed to create a Bachelor of Pharmacy degree, and the syllabus of at least one University was approved, but the matter does not seem to have gone further than that. Finance is the main trouble, for pharmacy schools are very expensive to equip, and very costly to run. Currently, fees run about £45 per annum, but with pill machines averaging £15 and dispensing scales £17, as well as the high cost of drugs, I can see the fees rising considerably in the near future.

#### Higher Qualifications

One of the most frustrating aspects for the young pharmacist is his inability to proceed to a higher qualification. No University will recognise the diploma as a basis for proceeding to, say, M.Sc., although the diploma is of graduate standing. Occasionally, very occasionally, some student goes to the United States to study for his master's degree. A considerable number of the newly qualified go to Britain and the Continent to broaden their experience or to get an optical diploma. At the moment no money is available to any pharmacy student, either for advanced studies in the Union or for research courses abroad, an oversight which it seems at the moment is not being considered by any official body.

The Pharmacy Students' Associations which have in the last couple of years become well organised and active have raised enough funds by their own peculiar methods to establish bursaries for needy students. To date there are no scholarships, no medals, no anything to encourage the students or to distinguish the more able student.

#### Military Service

Whilst talking of students, these have for some time past been subject to military service, with the result that in the middle of their apprenticeship, or even during a college term, off they go for three months' training. This does help make the apprentice physically fit, and imbues him with a certain amount of discipline; it tends to make the chemist or the teacher choleric. Now, as a result of negotiations, pharmacy students are to have their military training deferred from year to year.

#### Ethical Rules

The Board have recently been considering the Ethical Rules. Rule 9 at present makes it an unprofessional act for a chemist and druggist to dispense a prescription for sale by an unregistered person. It is now proposed to make it unethical to compound any prescription or medicine, not being in completed form, for sale as a proprietary medicine, on behalf of an unregistered person, for manipulation or packing or sale by such person in contravention of Section 37 of the Act.

These seem to be designed to prevent the dispensing of prescriptions written by unqualified practitioners, such as chiropractors, naturopaths, etc. One supposes that there must be a need for such a rule, but I have never seen a prescription written by one of these people. The only odd ones I see are those cut from

the Sunday paper, which paper assures me that they are written by M.D. Presumably postal prescribing is not unethical!

The Pharmacy Board also considered the question of doctors dispensing Schedule VI drugs. It is contended that doctors must keep records of these just as chemists do, but apparently the Board is not sure, since they are to seek legal opinion on the matter. So far as I can see, the law is quite plain. It does not differentiate between the classes of people who must keep records; it simply states that records must be kept.

This same Sixth Schedule still causes some considerable trouble. One prominent chemist is moved to state—incorrectly—that this schedule would never have been introduced if chemists had not mishandled these drugs. This was not the reason for introducing prescription-only drugs, for the request came from the Pharmaceutical Society itself.

I wonder if the way in which Pharmacy in all countries is governed has not retrogressed since the days of the Guilds. In those days people continued in practice only so long as they pleased the body of their fellow-practitioners.

Since it is not possible to fool everyone all the time, one who transgressed against their feelings would be speedily cast into the outer darkness.

#### Veterinary Medicines

A long article in the current issue of the "Pharmaceutical Journal" deals with Sixth Schedule Veterinary Remedies. This makes it plain that whilst normally such drugs require a prescription from a doctor or veterinary surgeon, if the same drug is packed under a brand name, registered under the Farm Feeds Acts, and bears recommendation, it can be sold without a prescription. This is a remarkable state of affairs, but this proviso was introduced to safeguard the interests of the farmers.

Unfortunately, quite a few people are aware of this, and, refused supplies by the chemist, go off to the veterinary suppliers and buy the drug without any trouble.

#### Insulin Production

Recent additions to the Union's industry is an insulin manufacturing plant now in full-scale production in Johannesburg. This is a joint venture sponsored by Boots in partnership with National Meat Suppliers. This factory will also produce surgical sutures and diosgenin, a precursor of cortisone. This latter product is to be extracted from a plant which grows a-plenty in the Cape Province.

#### Annual General Meeting

All pharmaceutical interest in South Africa is at present centred on the Annual General Meeting, to be held this May in the City of Johannesburg.

Johannesburg is the financial centre of the Union of South Africa. Some extent of its importance may be gleaned from the fact that in 1953 gold to the value of £140 millions was mined, and it is expected that some £30 millions of uranium will be mined annually before long. This engendered a local expenditure of £85 million per annum for machinery. For a city whose population is 350,000 Europeans and some 450,000 non-Europeans, these are quite creditable figures, and make Johannesburg the "Golden City" indeed!

At the Annual General Meeting, Councillors from all over the Union attend to consider the actions of the last year and a decide by means of resolutions the course of action for the coming year.

Resolutions cover all possible fields from constitutional to educational, and from legal to plain business. Not all are accepted, and some are accepted which are difficult to translate to reality. Each proposal

comes in for considerable discussion, and each Councillor has his chance to "shoot his particular line."

One particular resolution requests that every member of the Executive Committee shall be a Councillor elected by his Branch. Every Branch normally elects Councillors pro rata to its members, and from these the Executive Committee is chosen in the first place. Once a member of the Executive Committee, a member may attend the A.G.M. and still not be a Councillor. Some Executive Members prefer not to be Councillors, either because it gives their Branch an opportunity to send an extra representative to the A.G.M. or because they feel that as a member of the Executive they ought not to represent any particular Branch, but view their office from the national standpoint.

To the outside observer this seems like a proposal to institute caucus rule, where a Branch may compel an Executive member to vote as ordered, or they may withdraw his chance of attaining the highest office by not nominating him as a Councillor.

Two new types of members are proposed. In the past members have had to be proposed by a Branch, and to maintain membership of that Branch, with the result that chemists outside the Union have not been able to become members of the Society. It is now proposed to alter this, and also to introduce Honorary Associate Membership. This latter grade is intended to permit Bodies Corporate to become members of the Society, and thus enable them to share in the Government Dispensing Contract, which is between the Government and the Society.

Another resolution deals with the shop training of an apprentice. The S.A. Pharmacy Board stipulates that some 900 prescriptions must be compounded during apprenticeship. These scripts must be compounded, i.e., not poured out from a bottle of a proprietary or counted out from a bottle of tablets or pills. The character of modern dispensing is such that some chemists find it difficult to accumulate the required number of good "Old-fashioned" script, and the Board is now to be requested to permit proprietaries their proper place in the scheme of things. After all, it is symptomatic of the times!

The Medical, Dental and Pharmacy Amendment Act 1954 comes in for a certain amount of criticism—and the Executive also. It is true that the Amendment Act imposed a large number of tiresome conditions and gave little or nothing in return. In particular, all pharmacy resents the fact that the clause restricting dispensing to chemists was removed before the draft Bill became law.

In the Report of the Committee of Inquiry into the training of Chemists and Druggists, the Committee advanced the opinion that the sale of medicines and drugs ought to be restricted to chemists, but to date there has been no sign of any implementation. A resolution now presented to the A.G.M. requests that action be taken to bring this overt promise to fruition.

One of these steps is that the Pharmaceutical Society shall begin to negotiate directly with those in authority. At the last A.G.M. it was intended to give the Society power to do this, but under South African law it is a little difficult. The Society has no Charter of Incorporation like its British counterpart, and it has not proved possible to incorporate it as a company, to give it the right "to sue and to be sued, to plead and to implead."

Representation of pharmacy has always been done by the South African Pharmacy Board, but some members of the Executive Committee of the Society are always members of the Board. The motion to be considered requires a complete separation of entities in order that the Society's actions shall in no way embarrass the Board.

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vice, so that all members of Parliament, Senators, and Divisional Councillors may be informed of the Society's views on restricted dispensing and of the free sale of medicines by any Tom, Dick and Harry, with consequent exposure of the public to danger at the hands of those unskilled in the handling of drugs.

Although the Amending Act is hardly a year old, it is apparently intended to introduce, or try to introduce, further legislation to bring the law of Pharmacy more into line with the ideas of those who practice it.

The recent educational changes do not seem to please all Branches, since one in advancing a resolution requesting their amendment describes them as "harsh." Readers may recall that the course for the Diploma in Pharmacy was increased to three full years at college, with a two-year apprenticeship. Students, too, do not seem to relish the five years of work, although it merely brings the S.A. diploma into line with the British Ph.C.

Another Branch, whilst not mentioning the course, thinks that the two-year apprenticeship is too short. It certainly relieves the pharmacist of the help of the apprentice who in his third year is just beginning to be of use. Apprentices, however, have told me that in modern pharmacy they learn little after the first year. On the other hand, the Board seem to hold the view that the apprentice is not in the pharmacy to be of much help to the chemist, but merely as a pupil. Whatever the outcome of this resolution, I am assured that apprentices will not tolerate a three-year apprenticeship and a three-year course—might as well become doctors.

The Pharmacy Board have recently introduced a rule that candidates who have written an examination and failed five times must re-enter college for a full-time course of study. This has aroused considerable opposition, although very few are affected by it. The chief difficulty seems to be that courses are not available, colleges having all their work cut out to deal with the normal student. Come 1959, all students fall under the Regulations.

The Regulations regarding the keeping and selling of poisons introduced by the Amending Act have caused considerable heartburnings amongst chemists, who are well aware that doctors have exempted themselves from them. The Conference is to be asked to insist that doctors be compelled to observe the law, and that Inspectors be appointed to see to it. There is one snag—whilst chemists have never objected to an Inspector being a layman, the doctors always insist that they must be inspected by a doctor.

Perhaps we should send a Commission over to Australia to see just how the Regulations are enforced there? I notice some doctors paying pretty heavy fines for breaches of the Australian law.

Last year, as I have already mentioned, one Branch got a resolution passed at the A.G.M. designed to turn the S.A. Society into a body similar to the British Society, with compulsory membership and a disciplinary Committee. This would have had the effect of wiping out the Pharmacy Board, which is a quasi-Government body. This proved impossible to do, and the same Branch is now sponsoring a resolution to establish a fund to bring this about, regarding it as a long-term policy, requiring the education of the public and the Government, if not actual participation in elections.

Yet another Branch seeks to prevent doctors and vets establishing dispensaries as commercial enterprises. The late Minister of Health was worried about the few pharmacies established in country areas. The present motion seeks to inform the present Minister by a memorandum and a petition seeking relief from undue competition by doctors and vets and by general stores selling.

Newly qualified chemists do tend to establish themselves in business in the towns and the suburbs. To such an extent that one Branch, in an attempt to limit

overcrowding, is asking that the right be given to oppose the granting of apothecary licences. One Province already has this privilege, and it would be highly desirable from the chemists' viewpoint to extend it. Before a general licence to trade can be granted to, say, a butcher or an electrician, he must advertise his intention to apply in the newspapers, and his application can be opposed by interested parties. In three Provinces of the Union, however, apothecaries' licences are purchased over the counter like postage stamps.

The crediting of medicines issued on prescription will also be discussed. Many chemists have had the experience of dispensing an expensive ethical, only to have the patient return more than half with a request for credit. It is more than dangerous to do this, but often the chemist cannot refuse credit without offending a client. If these drugs are dispensed later, disaster could occur, especially if little Willie has been moved to play around with the medicine.

The motion seeks for it to be made unethical to accept prescribed drugs back for credit. It is actually unnecessary, since all a chemist needs is a little firmness and the knowledge that his indemnity policy would be invalidated by such an act. Occasionally it happens that for a good customer some arrangement must be come to to prevent financial hardship, but every chemist should know when to accept goods for credit and when to refuse.

The difficulty of getting examination results out promptly has long been a thorn in the sides of all concerned—especially the anxious examinees. Many attempts have been made to expedite the results, but with little success. The scattered centres, and the few examiners available, coupled with postal difficulties, make it very hard to publish the results in under two months. It is suggested that new examining Boards be created. There are many difficulties in the way, not the least of which is the shortage of examiners. South Africa is not blessed with a plethora of highly qualified pharmacists, although the shortage will be remedied within the next few years.

One resolution seeks to get the Society to sponsor a Chair of Pharmacy at a University. This would cost, I am told, some £50,000, and the University in question requires a guarantee of 100 students—almost the entire student body of the Union. Obviously the University requires pharmacy training to be on a firm financial basis. At present there are four Technical Colleges and one Afrikaans-speaking University providing the training; they have done it since the inception of the Board, and would be wiped out if this proposal gains favour.

A new angle on trading is brought to light by a request that the Pharmacy Board introduce an Ethical Rule to make it impossible to establish a pharmacy in a Nursing Home. This is indeed a new development, and I am told that one such pharmacy is now making application to have a shop front facing on to the street, so that it may catch its share of the passers-by. My little bird tells me that some doctors have shares in the nursing homes and in the pharmacy. Unethical? Not according to the ethical rules. Undesirable? What do you think? I can imagine what would happen if a chemist had shares in a doctor's practice.

This increasing tendency of the medical profession to trade in one way or another, and for the veterinary profession to do likewise, has aroused indignation in one Branch of the Society. If the length of their motion is any measure of their anger, then, indeed, they are very angry. The motion is too long to quote in full, but in effect it requires every chemist to sign a petition to go to the Minister of Health and to all members of the House.

The petition will in fact set forth the many grievances which burden the pharmaceutical fraternity, and to ask for redress. So far, only the late Minister of Health has shown any sympathy for the pharmacist—

and having had four Ministers of Health in as many years has not helped the position.

The profession is in a bitter mood, indeed, and so bitter is it that I visualise that within the next year they will rise in concerted action to demand what they rightly regard as theirs, viz., the sole right to dispense, the sole right to vend poisons and medicines.

It is strange that since the majority of those in authority in South Africa have their roots in countries where pharmacy is truly professional, there should not be more desire in high places to see it similarly organised here.

If we trace the origins of the Amending Bill, it stems from the report of the Committee of Inquiry into the training of Chemists and Druggists, held some years ago. The report stressed the shortage of chemists in hospitals and in the public services, and in order to remedy this a Bill was introduced. The five-year course was introduced, and it was said in the Report that some attempt must be made to make pharmacy more professional. This has not come to pass, and the only thing that pharmacy has got out of the Bill is the added burden of the 6th Schedule—the Potentially Harmful Drugs—to be sold on prescription only. This list has proved a great inconvenience, and we are told that it has been greatly reduced in length.

There is a move to get some further relief in the sale of some poisons. Tab. Codeine Co, for instance, are Division 1 in South Africa, sold on prescription or against a signature in the poisons book. Ephedrine is sold similarly, and it is hoped that these can be made into Division 2 poisons, requiring only a poisons label before they can be sold.

Unfortunately the Department of Health is not in the least inclined to relax restrictions, especially on drugs like codeine, which they regard as habit forming. This may be a blessing in disguise, as if they are made Division 2 then the general stores will be able to sell them also.

During the last two years attempts have been made to restrict the practice of pharmacy to pharmacists. Since chemists have had the right to limit their liabilities and trade as a company, many non-chemists have incorporated themselves, and, hiring a chemist as a managing director, have carried on open shop. Last year it was proposed that the controlling interest in the company should be held by a chemist and druggist, but it was not found possible to enforce this.

It is now suggested that the Board might more closely define the duties of a managing director. At the moment, although a man may nominally be a managing director, he need not hold more than one share, and may sign that away.

Obviously it is impossible for a person purporting to be a managing director to either manage or direct if he has no financial interest in the business. The crux of the matter is that he merely assumes responsibility as far as the Board is concerned for the pharmaceutical acts of the company. Something like the whipping boy of ancient times.

The Pharmacy Board seems sympathetic, but so far has not been able to translate sympathy into action.

Members of the Society have long had in view a state of affairs where the Pharmacy Board, now a quasi-Government body, is brought within the framework of the Society and subsidiary to it. To bring this about would require a new Act, completely separate from the present M.D. & P. Act. Such an Act has in fact already been drafted, and it is hoped one day to get it before the House. South Africa is, however, going through troublous times politically, and such an Act as is visualised would be bound to be pushed aside in favour of more pressing legislation.

Pharmacy, however, does not share the view that its legislation is not urgent, and I forecast this year a spirit of near-revolution amongst the chemists of South Africa.

## Trade Notes

### CARNATION TOILET TISSUE

Carnation, Australia's really soft tissue, is now available from your wholesaler in five shades—white, pink, blue, lemon and green.

All colours are the same price, namely 23/3 dozen (plus sales tax) wholesale and 2/11 each (including sales tax) retail.

### CHARLES McDONALD PTY. LTD.

In view of the expansion of the company's export business, the Sales Manager, **Mr. Norman McQueen**, Ph.C., M.P.S., will leave by air on July 3 for a tour of certain Eastern markets. Mr. McQueen expects to be away for about a month, during which time he will visit the company's agents in Singapore, Kuala Lumpur, Penang and Hong Kong.

The latest appointment to the Charles McDonald sales organisation is that of **Mr. H. G. Wallace-Wells**. He took up his duties as Medical Detailer/Sales Representative on June 14, and will be stationed in New South Wales. Mr. Wallace-Wells replaces Mr. P. L. Rowland, whose resignation from the company's services was accepted with regret.

### BOOTS PURE DRUG CO. (AUST.) PTY. LTD.

The above company has announced the addition of a number of widely-used drugs to the "Viule" injection technique during the last few weeks. They include Suspension of Streptomycin Sulphate and Heparin, White, 25,000 U/c.c., and Pethidine Scopolamine, for use by the medical profession.

A full range of Morphine Sulphate and Morphine Sulphate with Atropine in "Viules" will be available from July 1 as a benefit under the N.H.S.

During the past few months much interest has been shown in the use of "Viules" "Pro-Stabilin A.S." which is a ready suspended Procaine Penicillin G. aqueous in sterile single dose glass containers which are disposable after injection.

### BURROUGHS WELLCOME'S DISTRIBUTION DEPOT IN VICTORIA

To mark the opening of offices at the new Victorian Distribution Depot of Burroughs Wellcome & Co. Ltd., at 46-48 Albert street, Brunswick, the Directors of the Company held a cocktail party in the offices on the evening of June 25. Chemists and official representatives were invited.

The new premises will greatly assist the company in its handling and distribution facilities in Victoria.

### BURROUGHS WELLCOME & CO. (AUSTRALIA) LTD.

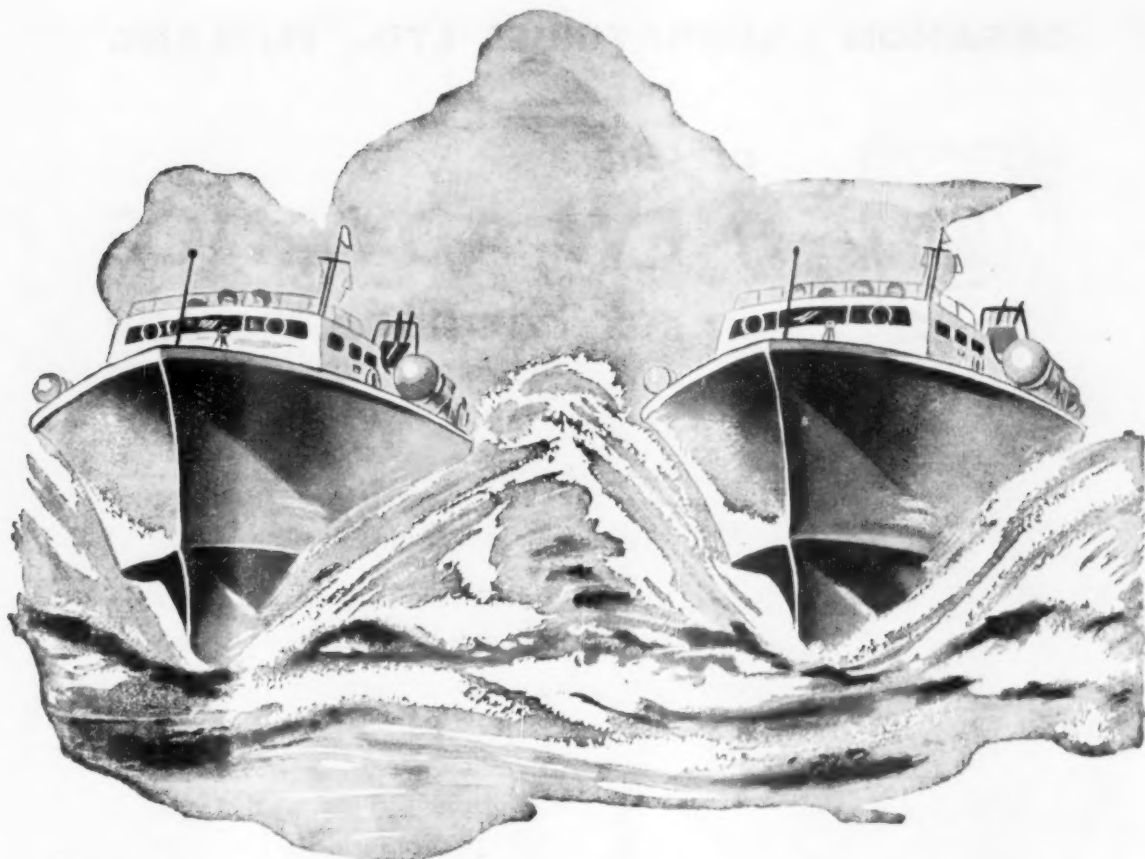
Burroughs Wellcome & Co. (Australia) Ltd. announces the following appointments:—

**Mr. R. Howarth**, Ph.C., M.P.S., as Assistant Sales Manager.

**Mr. L. B. Adcock**, as Representative in Queensland.

**Mr. A. G. Sargison**, as Representative in Western Australia.

**Mr. J. E. Strokowsky**, as Representative in South Australia.



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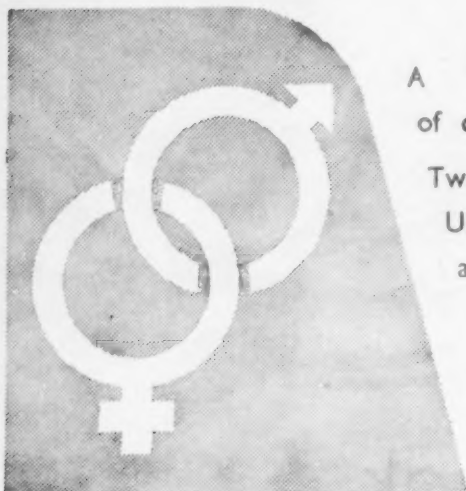
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**ORGANON LABORATORIES LTD., LONDON**



Mr. J. Brisk, as Representative in Newcastle and North-Western New South Wales.

Mr. Howarth took up duties in Sydney on June 20. The new Representatives are undergoing a course of training in Sydney prior to taking up duties early in July.

#### OPTIMISM ON S.E. ASIAN EXPORTS

Mr. Robert K. Gash, Australasian Export Manager for the Chesebrough Manufacturing Company, returned to Melbourne recently after a seven weeks' tour of South-East Asian markets. He flew a total of more than 15,000 miles visiting Djakarta, Singapore, Malaya, Hong Kong and Bangkok.

Mr. Gash predicts an optimistic future for the exporting activities of his company and of other Australian manufacturers. He warns, however, that unless an exporter is prepared to insist on a first-grade product, first-grade packs and shipping containers, he should stay out of the business.

Well-known brands from England, America and the Continent are all competing in South-East Asia, which had now become a "price and quality" market. Japan, too, is entrenching herself, but in the lower-price, cheaper-grade field.

Import restrictions were a problem in several countries, Mr. Gash found, but he was confident that they would improve. He found that Australian Trade Commissioners in all countries he visited were very progressive and had a complete understanding of local conditions.

Malaya is again presenting a considerable market for Singapore exporters, now that the terrorist activities in the "Emergency" are being more heavily restricted. Kuala Lumpur, Penang and Ipoh were particularly valuable markets.

Mr. Gash's tour coincides with the 75th anniversary of the Chesebrough Company, makers of "Vaseline" Brand toiletries, and is part of a world-wide campaign to extend and consolidate Chesebrough markets.

#### SOFTASILK CREAM MILD SOAP

Softasilk Cream Mild Soap was first marketed in Australia in June, 1954, and in just four months sales



of this product represented 2.4 per cent. share of the total toilet soap market.

The successful introduction of Softasilk Cream Mild Soap is attributed by the manufacturer, Colgate-

Palmolive Pty. Ltd., to its sampling campaign with Softasilk Hand Beauty Cream, plus a well-planned advertising campaign.

Now the company has launched another free sampling deal with this product which is designed to engineer the second phase in the marketing progress of Softasilk Soap.

This offer consists of two cakes of Softasilk Soap banded together with a free sample of Softasilk Hand Beauty Cream.

This offer will be strongly supported by radio commercials on the new Bob Dyer radio show "It Pays to be Funny," plus a solid press campaign commencing July 15.

#### FAULDING 110TH ANNIVERSARY

Birthday parties were held in all States recently to celebrate the 110th anniversary of F. H. Faulding & Co. Ltd., manufacturing chemists.

Founded on May 19, 1845, in a small shop in Rundle street, Adelaide, the company today has warehouses



MESSRS. F. D. Sandford, W. Adcock, R. White and H. Grabia with a combined service of 200 years with F. H. Faulding & Co. Ltd. in South Australia, cutting the birthday cake at the 110th Birthday Celebration of the Company at the Adelaide Town Hall on May 23, 1955.

in all States and laboratories in three States. Between all branches of the organisation over 1000 people are now employed.

The Adelaide function, in the form of a social and dance, was held at the Adelaide Town Hall, where over 750 members of the staff and their guests were welcomed by Mr. A. F. Scammell, Managing Director. In his address of welcome Mr. Scammell referred to the progress the company has made, and thanked members of the staff for their energy and loyalty. He said the company enjoyed excellent staff relations, and remarked that functions of this kind were important to a family organisation such as this.

Telegrams of congratulations and good wishes received from the company's branches in London, Sydney, Melbourne, Perth and Brisbane were read after the address.

The company's birthday cake was cut by Messrs. F. D. Sandford, W. Adcock, R. White and H. Grabia, who between them have spent 200 years in the service of the company.

## KODAK PUTS FLASH PHOTOGRAPHY WITHIN REACH OF ALL

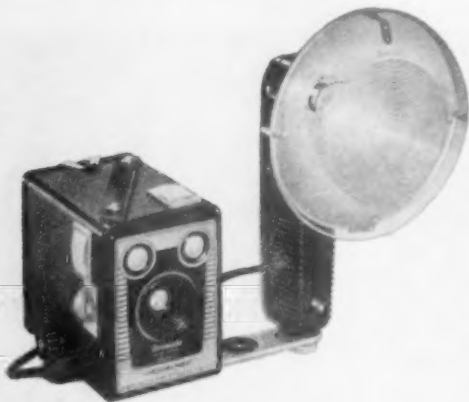
With the announcement of its new Australian-made flash unit, the "Kodak Flashholder, Model 2," Kodak (A'asia) Pty. Ltd. has given the biggest boost to amateur picture-taking since the war.

Almost anyone who owns a camera, whether it be a Box Brownie or a Retina, can now indulge in the popular overseas pastime of "Flashsnapping."

The use of flash eliminates the biggest problem in amateur photography today—the problem of exposure. The flash itself provides sufficient light to ensure a well-exposed picture, irrespective of general lighting conditions.

Opportunities for "Flashsnapping" are practically limitless—children's bedtime, bathtime, or birthday; teenage and adult parties; the family at home, around the fire—anywhere, any time.

All this obviously represents big business for pharmacy. The Kodak Flash Campaign opens on July 1,



and advertisements have been booked for metropolitan and country press, national women's magazines, and other national journals, plus announcements over selected radio stations.

No less than ten advertising aids have been offered, without charge, to all pharmacists, and these are available from your Kodak Branch in time for the opening of the campaign on July 1.

Being locally produced, supplies of the Kodak Flashholder are unlimited.

### WHITEHALL PHARMACAL COMPANY 170,000-Gallon Lake on Factory Roof

At Parramatta there is 50,000 sq. ft. of roof permanently covered with water to a uniform depth of 6 in. It has been purposely put there to insulate the factory against extremes of heat and cold.

Opened early this year, the factory is cool even in midsummer, which is important to the quality of the products manufactured by the Whitehall Pharmacal Company.

The fame of this roof has now spread overseas, and

recently an inquiry on its construction was received from Switzerland by the architect, Mr. E. M. Nicholls.

While this type of roof is used widely by the Whitehall Pharmacal Company in the construction of its factories in other parts of the world, and there are a couple of smaller expanses covered with water even here in Australia, Mr. Nicholls found construction details hard to get. Replies from previous builders were non-committal, so he set out to solve the problem himself.

He spent much time with the Commonwealth Building Experimental Station, working on the theory that 4 in. of water will stop the penetrating effects of infrared ultra violet rays and X-rays which break bitumen down.

The problem was to make it practicable. A tank was needed which would be independent of normal roof movement beneath, for the finest crack would cause leakage and serious damage.

After much research the cement base was covered with overlapping layers of paper felt, then with thin layers of asphalt to a depth of 1½ in. The paper felt



The Architect had a problem when he designed this factory for the Whitehall Pharmacal Company last year. The 50,000 square feet of roof is permanently covered with six inches of water to insulate against heat and cold.

acts as a slip joint between the structural roof and the asphalt tank. Contractors for this job were required to guarantee their product, assuring water tightness, for 20 years, a deed being drawn up for them to sign to this effect. Only one tender was received. This came from Neuchatel Asphalte Co. (A'asia) Pty. Ltd.

The 170,000-gallon lake is chemically treated to prevent vegetable growth and discourage mosquitoes from breeding. An automatic filling system and spillways provide against excessive rainfall and evaporation.

### NATIONAL ADVERTISERS PRESIDENT LEAVES FOR ABROAD

Mr. Harry I. Fader, Managing Director of Potter & Moore (Aust.) Pty. Ltd., and President of the Australian Association of National Advertisers, left for America on May 17 by Qantas. Mr. Fader was accompanied by his wife.

Prior to leaving Melbourne, Mr. Fader was received by the Victorian State Governor, Sir Dallas Brooks, K.C.B., K.C.M.G., K.C.V.O., D.S.O.

There are two aspects to Mr. Fader's trip. One is on behalf of the National Advertisers in relation to

**Ads like this  
are working for  
—YOU!**



## Five days of new freedom

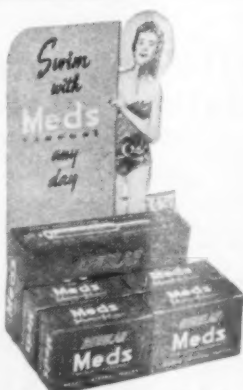
The Secret of going Anywhere, doing Anything—  
Any day of the month is known to countless  
thousands of women who have discovered Meds.  
Meds—the safer, softer tampon that means  
no belts, no pins, no tell-tale outline.

Want to know  
more of Tampons?

Our FREE Meds book tells you all about internal  
sanitary protection. Write for your copy to Nurse Reid,  
Johnson & Johnson, Box 3331, G.P.O., Sydney — It  
will help you towards greater comfort and enjoyment.



PRODUCT OF JOHNSON AND JOHNSON



The Meds Dispenser Unit is  
specially designed to act as  
a point-of-sale reminder, and  
to make Meds buying easier.  
Displayed on your counter, it  
will increase your sales.

## Get your share of the swing to Meds

1955 will be the biggest year in Meds history. Already, everywhere, more women  
are discovering the "Five Days of New Freedom" that Meds so safely ensure. Take  
advantage of this greater-than-ever demand. Display Meds prominently. Recommend  
them.

### ● INTENSIVE YEAR-ROUND ADVERTISING

Day after day, week after week, every woman throughout Australia will be con-  
stantly reminded of the new freedom Meds provide. All popular Women's Magazines  
will feature frequent advertisements.

### ● FREE EDUCATIONAL MEDS BOOKLET

Interest created by Meds advertisements will be consolidated by the offer of free,  
educational Meds Booklets—containing important information and advice prepared  
by competent Medical Authorities.

**A PRODUCT OF JOHNSON & JOHNSON**  
**THE MOST TRUSTED NAME IN SURGICAL DRESSINGS**

JJ10 F.P.

# Approved Professionally

## Masse NIPPLE CREAM



### Masse NIPPLE CREAM

Contains 5-Amino acidine 0.0695% and allantoin 2% in a cream base. The base is highly emollient, preventing drying and hardening of the nipples.

### In ante and post natal prevention and treatment of cracked nipples.

Masse is invaluable in the last three months of pregnancy for the preparation of breasts for nursing. Daily massage with Masse makes the nipples and areolae soft and pliable and removes the scales that frequently cover the nipples.

Masse is odourless, tasteless and non-toxic, so that breasts need not be washed prior to nursing. It is readily absorbed and does not stain or soil clothing. Nipple shields, wax paper or muslin squares are not required.

Masse provides pleasant prophylaxis against tender, sore nipples, fissures and abrasions when cracked nipples have developed. Masse hastens healing and aids in preventing breast infection.



## Pharmaceutical Company

SYDNEY



the production of television—Mr. Fader is a member of the Advisory Committee of Audio Visual Research at the University of Melbourne. For his own company he will negotiate with a number of American manufacturers who are desirous of having their products manufactured in Australia.



Mr. Harry I. Fader, Managing Director of Potter and Moore Aust. Pty. Ltd., and President of the Australian Association of National Advertisers, who left recently for America. Mr. Fader was accompanied by his wife. They were farewelled at Mascot by Mr. John Bourke and Mr. Cedric Barrow, of Potter and Moore. From left to right: Mr. John Bourke, Mrs. Fader, Mr. Harry Fader, Mr. Cedric Barrow.

He is also seeking new plant and machinery for Potter & Moore's £200,000 factory to be erected on an 8½-acre site in the Melbourne suburb of Moorabbin.

Mr. Fader will return through South-East Asia, where he hopes to expand export markets established by his company last year.

## SIGMA COMPANY LIMITED

### Annual General Meeting of Shareholders

The Annual General Meeting of shareholders was held at the new offices of the company, 589 Collins street, Melbourne, on April 28. Mr. E. C. McClelland, Chairman of Directors, who presided, read apologies received.

After the Secretary had read the notice convening the meeting, the Chairman suggested that, as the proceedings of the previous annual general meeting had been published in "The Australasian Journal of Pharmacy" of May, 1954, they be taken as read. Mr. E. G. Leete moved, Mr. Frearson seconded, that the minutes be taken as read and confirmed and the motion was carried.

In supplementing the Chairman's report, as published and circulated to shareholders, Mr. McClelland thanked the shareholders for their continued support, and mentioned that sales for the year had exceeded 2½ million pounds. He expressed the hope that all activities would be housed in the new warehouse before the next annual meeting. He then surveyed the growth of the company's success, and pointed out that the major factor influencing the size of this year's dividend cheque was the return from the sales of the company's own proprietaries. He re-emphasised the necessity of all shareholders recommending and pushing the company's own brands. Reference was also made to the purchase during the year of the business of Viogen (Aust.) Pty. Ltd., which gave Sigma a footing in the tooth paste market. The Chairman moved that the

balance sheet and profit and loss account be adopted. Mr. C. P. A. Taylor seconded the motion, which was carried without discussion.

The Chairman announced that Mr. A. H. Mansell, the retiring Preference Director, was unopposed, and he declared Mr. Mansell re-elected.

The next item was the election of a Director to represent Ordinary and Vendor shareholders. Mr. F. N. Lee, the retiring Director, being eligible, offered himself for re-election. Mr. Wellington Lee was also a candidate. A postal ballot had been held and Mr. F. N. Lee was re-elected by a large majority.

Mr. Mansell and Mr. Lee expressed thanks for the confidence shown in them.

The Chairman announced that the next business was to fix the remuneration of Directors for the ensuing year. Mr. T. S. A. McCausland complimented the Directors on the progress the company had made, and he referred to the increasing responsibilities held by the Directors. He then moved that the Directors' fees be fixed at £1600 per annum, the sum to be divided as thought fit by the Directors. In doing so, he pointed out that this represented about one-third of 1 per cent. turnover. The motion was seconded by Mr. D. A. Lees, and carried after a general discussion, including a question from Mr. H. A. P. Ankerson, who referred to the sum shown in the last report. Mr. Morrison, the Secretary, explained that the present motion referred only to Directors' fees for Sigma, independently of any subsidiary company.

Messrs. Davey, Garcia and J. G. Davis, the retiring Auditors, were re-elected at a remuneration of 1200 guineas, on the motion of Mr. D. Lees, seconded by Mr. C. P. A. Taylor.

This concluded the statutory business of the meeting, and the Chairman invited general discussion. He called upon the General Manager to address the meeting, and in doing so, Mr. Haigh mentioned that during the previous evening members of the staff had been guests of the Directors, and that he had been privileged to trace for them the growth of the company from its inception in 1912, without premises or capital, to the present purchase of one of the largest single blocks of land in the heart of the city. Mr. Haigh then outlined proposed plans for occupation of these buildings.

Mr. C. Crowther asked whether provision was being made for a parking area for shareholders attending the warehouse, and was advised that it was hoped to include such facilities.

Other shareholders enquired concerning specific matters of service, all such queries being satisfactorily answered. Mr. P. Lang enquired whether the Board had considered the establishment of country depots, and was informed that these had been considered, and a decision was that they could not be justified at the present time, but the matter would not be lost sight of.

The meeting closed at 10.5 p.m.

## P.A.T.A. OF N.S.W.

Notified 10/6/1955—

General Section: Addition		
Retail	Jay Martell Products Pty. Ltd.	Wholesale
19/9	Jay Martell Formula Four	11/3 each
Chemists' Section: Addition		
7/6	William R. Warner & Co. Pty. Ltd.	
	Peritrate Tablets, 20 mg.	60/- doz.
Alteration		
6/-	William R. Warner & Co. Pty. Ltd.	
	Peritrate Tablets, 10 mg.	48/- doz.
General Section		
	Schaffer & Company.	
3/6	Buckley's Canadiol Mixture	31/6 doz.
3/6	Buckley's Wintrol Rub	31/6 doz.

### **PRESCRIPTION PROPRIETARIES CARD SERVICE**

The 15 cards to be issued shortly for the month of June, 1955, will deal with the following products:—

A: 95	Ambodryl.
A: 96	Aerosporin Otic Solution.
C: 105	Calped Cream.
C: 106	Calped Powder.
L: 21	Lipomin.
N: 51	Neosporin.
N: 52	Noctynol.
S: 73	Serpiloid.
S: 74	Styrasorb Tablets.
S: 75	Streptaquaine (Evans)—N.H.S.
S: 76	Sacchar-12 Tablets.
S: 77	Sertensin.
S: 78	Siguent Ophthalmic Bacitracin and Neomycin.
V: 43	Vermazine Worm Syrup.
T: 59	Tussinol with Pholcodine.

Subscriptions (£3/3/-) to the P.P. Card Service for 1955 (including the new Index Book) may be entered at any time. Renewals or new subscriptions, accompanied by cheque, should be addressed to The Manager, "The Australasian Journal of Pharmacy," 24-26 St. Francis street, Melbourne.

A few sets of the 1954 cards (£3/3/- per set) are on hand. We regret that the cards of earlier years—1951, 1952 and 1953—are now out of print.

### **SALK VACCINE**

The following illustrations show stages in the production of Salk Anti-Poliomyelitis Vaccine at the Wyeth Laboratories, Pennsylvania, U.S.A.:—



Kidneys removed from healthy Rhesus Monkeys are minced by hand, then mixed with synthetic nutrient to foster maximum growth of the tissue culture.



In these vessels the live Polio Virus is killed chemically.

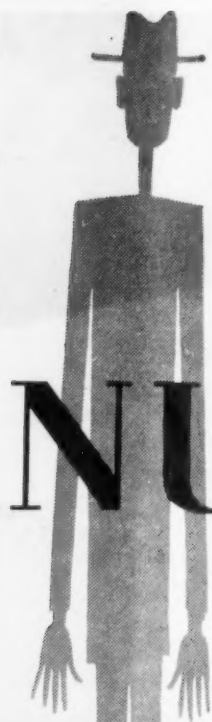


Large stainless steel vessel in which three strains of the Vaccine are mixed, then siphoned to 20-litre bottles on shelf. Each bottle holds about £17,800 worth of vaccine.

### **HONESTY**

"There is hardly a pharmaceutical publication coming off the presses these days that does not make some mention of substitution. Many proposals have been and will be advanced for the cure of this evil. However, as I see it, the cure is simple, and can be wrapped up in one word, 'HONESTY.'"

—Hendley, George F.: "Honesty is the Only Way," Virginia Pharm., 38:597 (Dec. 1954).



*A new, profitable opportunity for pharmacists  
exists through the introduction  
of an entirely new product—*

**TO PROVIDE FOR A QUICK GAIN IN WEIGHT,  
ENERGY AND APPETITE, WITHOUT GASTRIC BURDEN**

# NUCROSE

(ORAL FAT EMULSION)

Well known to pharmacists is the reducing remedy market. In addition, there exists a large market for a product which will increase weight for that group of patients who are resistant to ordinary weight gaining methods. Nucrose fulfils this requirement.

## WHAT IS NUCROSE?

Developed by the Schenley Laboratories in America, Nucrose is a palatable, stabilised emulsion of extremely small particle size (average, 1 micron), prepared from fine quality oil (50%) and sucrose (12½%). The unusually small particle size favours ease of digestion and rapid assimilation.

Nucrose furnishes extra calories without adding unappetising bulk to the diet.

Now made under licence in Australia and distributed through Potter & Birks Pty. Ltd.

## VIGOROUS PROMOTION

A vigorous distribution of literature to doctors, distribution of samples and detailing is now proceeding and should result in substantial sales for this new and attractive product.



**The High-tension Type,** burns too many calories and "haan't time" for meals.



**The Perennially "Skinny" Patient,** "eats like a horse" yet gains not an ounce.



**The Debilitated Patient,** underweight through stress of surgery, illness or accident.



**The Emotionally Disturbed Patient,** who has lost interest in food.

## NUCROSE FORMULA

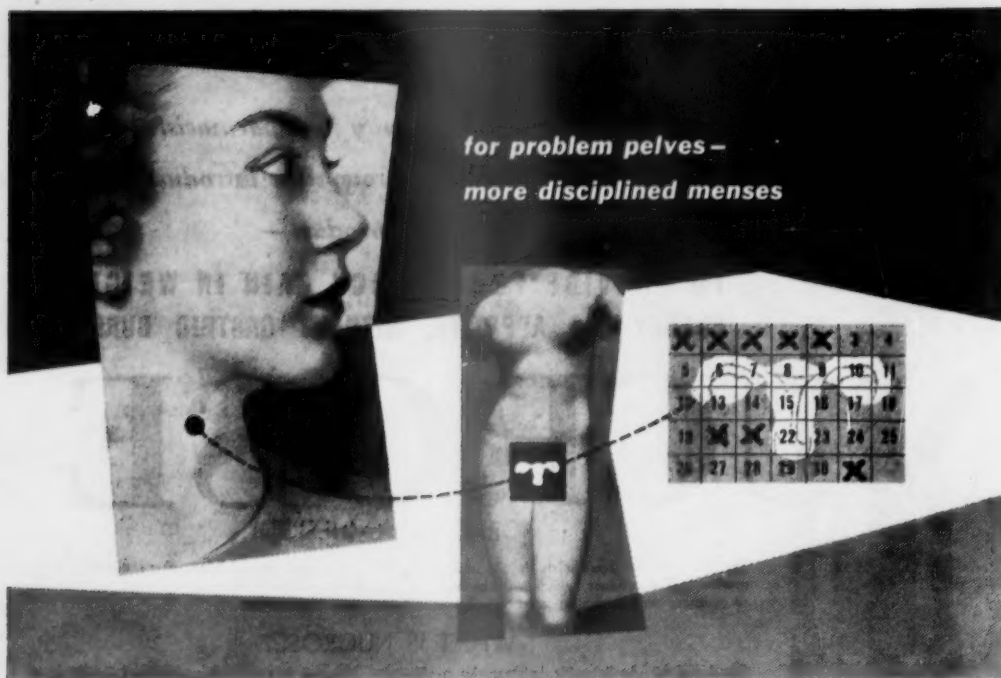
Coconut Oil	50.0%
Sucrose U.S.P.	12.5%
Glyceryl Monostearate	1.5%
Polyoxethylene Sorbitan Monostearate	2.0%

schenley

Pharmaceutical  
Preparations

Obtainable from all wholesalers throughout Australia—size 16 oz., 13/3. Retail price, 18/6 plus dispensing fee

Distributed through POTTER & BIRKS Pty. Ltd., Grosvenor St., Sydney, N.S.W.



## Predictable thyroid therapy

A clear correlation between hypothyroidism and gonadal dysfunction shows "... a more than coincidental relationship between thyroid disease and pelvic disorders. . . ." When you employ thyroid therapy as a "fundamental" in the management of menstrual irregularities in hypothyroids,<sup>2</sup> use Proloid, for therapy that is more *predictable*.

Virtually pure thyroglobulin, Proloid is assayed both (1) chemically and (2) biologically in test animals to provide constant potency and uniform metabolic effect.

Proloid purity and predictability make it especially valuable for therapeutic tests too. In some puzzling cases, "... even though sharply defined manifestations of

diminished thyroid function are absent,"<sup>3</sup> a therapeutic test is justified. But a test with Proloid is more likely to be definitive—free from therapy-induced ups and downs due to potency variations.

Proloid is prescribed in the same dosage as ordinary thyroid and is available in  $\frac{1}{2}$  and 1 grain tablets.

## Proloid

### Bibliography:

1. Ferrer, F. P., and McGavack, T. H.: *Am. J. Surg.* 85:67 (Jan.) 1953.
2. Mason, L. W.: *West. J. Surg.* 55:338 (June) 1947.
3. McGavack, T. H.: *The Thyroid*, St. Louis, C. V. Mosby Co., 1951.



**WILLIAM R. WARNER & CO. PTY. LTD.**  
508-528 RILEY STREET, SYDNEY, N. S. W.

A.J.P. PRO. 55. AUS.



# Student Activities

## THE NATIONAL UNION OF PHARMACEUTICAL STUDENTS OF AUSTRALIA

(Incorporating the N.U.A.U.S. National Faculty Bureau in Pharmacy)

A report on progress by David M. Lowrey (President).

**EDUCATION.**—Although N.U.P.S.A. formulated a policy on Pharmaceutical Education some years ago and this has been re-endorsed practically unchanged at each of the subsequent National Council Meetings, there is still a need for the broad framework to be stated again. This is:—

- (a) Entrance standard to be that of University Matriculation.
- (b) Three years full time training at a University, terminating in the degree of Bachelor of Pharmacy.
- (c) During a period to be defined, registration as a Pharmacist able to conduct a Pharmacy, probably achieved by the serving of twelve months in a retail Pharmacy. This should not be followed by any examination.
- (r) Post-graduate courses, possibly terminating in the degree of Master of Pharmacy, should be available in fields as Hospital, Manufacturing, Retail or Applied Research.

It is generally agreed that the above would be implemented in three stages (1) Matriculation Entrance; (2) Course at the University; and (3) University Degree Course.

**New South Wales.**—The new Course, embracing as it does the principle outlined above, is now law, but will not commence until finance is available.

**Tasmania.**—(Entrance standard here is practically equivalent to Matriculation.) The progress of Pharmaceutical Education has been accelerated by the appointment of Dr. Burgin as Senior Lecturer. The standard has already been raised very considerably.

**Queensland.**—The Executive commends the State Branch of the Guild for its action on its recently undertaken survey on Apprenticeships and Education in submitting to the Government proposals for the course. The Executive supports the plan for the Pharmacy Course to be raised to Matriculation Entrance.

**South Australia.**—Over the past three years, great strides have been taken to improve the Pharmacy Course. The full-day at the University gives the student the opportunity to use his leisure time in order to broaden his horizons by mixing with students from other departments.

**Western Australia.**—The Pharmacy Course, conducted at the Perth Technical College, is very up to date, particularly in regard to sterilisation techniques.

**Victoria.**—The Course, here proudly run, and justifiably so, is under the auspices of the Pharmaceutical Society. Collective opinion, however, is against isolation from other Faculties.

N.U.P.S.A. has other schemes afoot for raising the general standard of Pharmaceutical Education in Australia. The heartening progress in the move to secure a limited number of combined Commonwealth Scholarships for Pharmacy-Science, may result in the granting of a few this year by the Universities Commission. The Executive appeals to anyone favourably disposed to the

above scheme to write to the Honorary Secretary. At the moment, a submission is being prepared for the August meeting with the Commission.

The Executive supports the Kodak Travelling Scholarship Scheme and congratulates Kodak on such a useful and important gesture. It is to be hoped that other respected manufacturing bodies will provide similar schemes as time marches on.

The Executive notes with approval the Sydney visit arranged by Parke, Davis & Coy. Ltd. for the two best scholars in each State and from New Zealand, and regards the broad-term gain for pharmacy as desirable and commendable as the individual benefits derived by the recipients. With the recent Australia-wide Survey on Pharmaceutical Education by the N.U.P.S.A. International Officer, the Executive felt that a new post was necessary to administer the large field of education. Mr. Neil Bannister, from South Australia, was subsequently appointed.

**CONDITIONS OF APPRENTICESHIP.**—The comprehensive survey, organised by the previous Executive, has been in the hands of the Federal Guild since October last, and assurances were then made that various anomalies would be looked into. Further action is contemplated this year.

**INTERNATIONAL.**—N.U.P.S.A. is a foundation member of the International Pharmaceutical Students' Federation, which meets in Europe approximately every year. Besides overseas representatives (of which there are seven this year), there is maintained a Local Secretary, who acts as a liaison between I.P.S.F., the O.R.'s and the Executive. This year the scope of this Department has been enlarged to a considerable extent and N.U.P.S.A., like other responsible organisations, has accepted certain obligations towards our Asian neighbours. A link has been established with the **Colombo Plan**; a Victorian Ph.C. was one of the first four to take part in the **Indonesian Graduate Employment Scheme**. This scheme, started primarily as a gesture on Australia's behalf to succour Indonesia's newly won nationhood, enables Australian pharmacists to work in Indonesia for one or two years. **Student Exchange** with New Zealand is now well established and three Kiwis have attended the last two Congresses. A University Student Plane Charter Scheme will enable at least five New Zealanders to attend the next Congress in N.S.W., and in August this year Miss Annette Simmons, the 1954 Secretary, will reciprocate these visits by crossing the Tasman for a working tour.

With reference to South-East Asian bodies, information and publicity has been sought from the United Nations Educational Scientific and Cultural Organisation. A Congress resolution to initiate contact with pharmacy students in these areas is being put into operation. An Asian Students' Bureau has also been established by the Executive with officers in Sydney and Melbourne. This will act as a focal point for those requiring information, and will aid in placement of apprentices. Mr. Gordon Brown, of Queensland, is International Officer.

**PUBLICATIONS.**—The good work of the Text-Book Concession Scheme has been continued this year, although there has been some disinterest shown by some States. Two orders have been sent to Pharmaceutical Press and plans are afoot for expanding the scheme to include other pharmacy syllabus text-books. It is hoped to include the new A.F.P. when it becomes available.

**THE PHARMACY STUDENT.**—This colourful department of N.U.P.S.A. is in the hands of Mr. James Hayes (N.S.W.). The financial aspect of the magazine will be looked after by three business managers, and the Executive looks forward to another informative and thought-provoking effort.

(Continued on page 682)

# Commonwealth and State News

## COMMONWEALTH

### PERSONAL and GENERAL

#### APPRENTICES AND NATIONAL SERVICE

##### Question in Parliament

The following question was asked by Senator Aylett in the Senate on April 20:—"Will the Minister inform me whether it is compulsory for apprentices, at the end of their original apprenticeship period, to serve a period equivalent to the period of their National Service training?"

Senator Spicer.—Offhand I should have thought that the apprentice would have to serve the full period of his apprenticeship, whatever it may be. I know of nothing that would relieve him of that obligation.

Senator Aylett.—What would be the position in respect of his period of National Service training?

Senator Spicer.—I assume that the honourable senator refers to the case of an apprentice who has entered into an agreement to serve for a term and during that term is called away to render service as a National Service trainee. As I have said, offhand I know of nothing that counts that as part of his apprenticeship period. However, I shall make inquiries and see if there is anything in the point that the honourable senator has raised.

#### APPOINTMENT OF PHARMACEUTICAL CHEMIST TO COMMONWEALTH CUSTOMS DEPARTMENT?

In the Senate on May 10, Senator Robertson asked the Minister for Trade and Customs whether, after a Commonwealth-wide investigation concerning entry of illegal drugs into the Commonwealth, a promise was made that a qualified pharmaceutical chemist would be appointed to the Customs staff to assist in these matters, and whether such an appointment had been made.

In reply, the Minister for Customs said that a wide survey was made by the Commonwealth Department of Health in the matter of control of dangerous drugs, but he had no knowledge of a promise that a trained pharmaceutical chemist would be appointed to his department. However, such an appointment was considered, but was deemed unnecessary, and had not been made.

The Minister continued: "The Commonwealth Department of Health freely makes available to the central office of the Department of Trade and Customs the service of a senior pharmaceutical chemist when matters requiring technical advice arise in connection with the control of dangerous drugs. In addition, the State offices of the Department of Trade and Customs had trained analysts on the staff at all main ports."

#### QUESTION REGARDING SERPASIL

Senator Courtice asked in the Senate on May 10 if the Minister representing the Minister for Health would request the Minister for Health to consider placing the drug Serpasil on the free drug list. He stated this was an expensive drug, and was being prescribed generally by medical practitioners, particularly for blood pressure cases.

Senator Cooper, in reply, said he would be pleased to bring the Honorable Senator's question to the notice of the Minister for Health, in order that he might de-

cide what he could do in regard to the drug. Later (May 24, 1955) Senator Cooper supplied the following additional information:—

"The question of whether serpasil should be included in the list of benefits under the National Health Act was recently submitted by the Commonwealth Department of Health to the Pharmaceutical Advisory Committee established under the National Health Act. This committee, whose recommendation is necessary before any drug can be added to the list, was not prepared to recommend its inclusion."

#### STUDENT ACTIVITIES

(Continued from page 681)

**SONG BOOK.**—At long last, efforts in this direction are bearing fruit and Mr. Geoff Tauro already has quite a wide selection. The publication is expected to be out well before the end of the year and enquiries should be made to committee members in each State.

**THE CALL.**—Despite the lighter moments, pharmacy students do necessarily feel the impact of citizenship and national responsibility, particularly when the world is in such a chaotic state and when such an impending crisis lies to our near north. To this extent, N.U.P.S.A. endorses and supports the movement known as The Call to the People of Australia... a movement which calls for a new national moral standard. N.U.P.S.A. urges constituent associations to contact their local Call Committee and obtain readily accessible films and information, etc., to bring before the notice of their individual student members.

**GENERAL.**—Action on motions at Congress with regard to the N.U.P.S.A. Publicity Booklet, National Service Training, Country Students and Premiums is to be taken shortly.

In conclusion, therefore, the Executive wish their members a prosperous year and a happy trip through annual examinations. May we further state that as N.U.P.S.A. exists solely to look after the interests of its members, any grouching, grumbling, complaint, proposition, criticism or idea will be given due consideration by the Executive and acted upon if possible.

#### AN IMPORTANT FORM OF INSURANCE

"In spite of this effort in looking out for the future, many men and women in the profession of pharmacy neglect to investigate one very important phase of insurance. By failing to investigate this type of protection, they are leaving an integral part of their professional and business life vulnerable to attack and destruction. I am, of course, referring to a very economical form of professional and business insurance used successfully by millions of professional and business people for nearly 100 years—membership in local, state and national professional organisations—the capstone of protection against the myriads of attempts to negate the position of our profession in the business community."

—Reese, Frank H.: "Association Membership — A Matter of Professional and Business Insurance," The Apothecary, 66:14 (Dec. 1954).

# AGAIN AVAILABLE ON BONUS TERMS



**SOOTHE** sore throats  
*in a matter of seconds*

*IN ATTRACTIVE DISPLAY BOXES  
OF ONE DOZEN*

*With a Charge for Eleven Tins Only*

ORDER NOW THROUGH YOUR REGULAR WHOLESALER

**MERCK & CO. Inc.**  
FAIRFIELD, N.S.W.

## A new Viadol

Previously the Vitamin A content of VIADOL was obtained from shark liver oil concentrate, thus producing a strong, fishy odour and taste.

NOW this concentrate will be replaced by synthetic Vitamin A Acetate, eliminating the often objectionable taste and odour.

## VIADOL

Presenting Vitamin A Acetate equivalent to 18,000 i.u. of Vitamin A and 2,500 i.u. of Vitamin D in each gramme, it is a most pleasant method of administering these essential Vitamins, whether for actual deficiencies or as a prophylactic.

**Daily Requirements**—1-12 years—One to three drops two or three times daily.

Over 12 and adults—Three to five drops two or three times a day.

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For over forty years the DAVID G. BULL LABORATORY has specialised in the production of injection solutions in ampoules, under the "HERMETTE" trade mark.

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# WESTERN AUSTRALIA

## PERSONAL and GENERAL

### State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in W.A., Mr. F. W. Avenell (phone BA 4082).

**Mr. D. G. Kinleyside** has opened a pharmacy at Cannington.

**Mrs. J. E. Scull** has accepted a position at the Friendly Societies Dispensary, Subiaco.

**Mr. A. M. Forte** is at present managing Mrs. Nicholls' pharmacy at Osborne Park.

**Mr. A. M. Steinthal**, who has been in hospital for a week or so, is reported to be progressing satisfactorily.

**Mr. A. Cohen** has purchased the pharmacy of Mr. J. D. Henderson at Maylands. Mr. Henderson has returned to New South Wales.

**Mr. E. A. O'Callaghan** has left the Ocean pharmacy at Scarborough, the management of which has been taken by Mr. J. Benn.

**Mr. R. W. D. Fort** has opened a modern pharmacy at Doubleview. Mr. J. B. Green has accepted the position vacated by Mr. Fort at Hollywood Hospital.

**Mr. M. H. Arnold** has opened a branch pharmacy at Beaufort street, Mt. Lawley. Mr. P. R. Merryweather is in charge of the branch.

**Mr. J. Rowe**, who has been in Royal Perth Hospital for some time, is reported to be making reasonable progress.

**Mr. A. K. Lloyd**, of Geelong (Victoria), paid a visit to the Pharmaceutical Council office on May 16. He was spending a few days in Perth awaiting the return journey per the "Westralian."

**Relievers** registered this month included Mr. M. J. Compart for Mr. N. R. Jeanes of East Fremantle; Mr. J. B. Green for H. V. Sunderland of South Fremantle; Miss K. McGuckin for Mr. R. D. Rogers of Kellys Ltd., Kalgoorlie.

### LIBRARY

A recent addition to the Pharmaceutical Society's library should prove interesting to many members. The book is entitled "Culpeper's Herbal," and was presented to the Council by Imperial Chemical Industries of Australia and New Zealand Ltd.

### LIQ. FERRI PERCHLOR POISONING

#### Inquest on Baby Girl

After hearing evidence first at Merredin and later at Perth, the Coroner (Mr. R. M. Ansell) gave his finding at Perth on May 20, concerning the death of a year-old baby girl, Hilary Margaret Brown, at Merredin, on December 30, 1954. The child had eaten some sheep dip, and in the course of subsequent treatment a stomach wash was ordered.

These extracts are taken from the Coroner's finding:—"I have considered the authorities and the evidence and find that the substance causing the death of Hilary Margaret Brown was ferric perchloride.

"The three people mainly concerned with the treatment of the patient were:

"First, Sister Rosich, who was given brief instructions by the doctor to give a stomach wash with the fluid provided—leave 2 oz. in stomach—grain of phenobarb—admit the patient. Sister Rosich was handed two bottles—each labelled, indicating that they contained different fluids. She mixed these fluids—this mixing had no harmful effect on the patient. She should have had instructions before mixing fluids. Sister Rosich says, and I believe her evidence, that a fluted bottle did not indicate to her that the contents would be poisonous. The label on the bottle gave no indications that it contained a poisonous substance. She is taught

to read the label, not the back of the bottle, where the words "Poisonous—Not to be Taken" are to be seen on close observation. She should have kept the stomach wash.

"The change in the patient's condition should have been reported, and the presence of the yellow substance referred to her superior or in her absence the doctor.

"Sister Rosich qualified as a nursing sister in October, 1954—was without experience. She did her best.

"The chemist and pharmacist, Mr. C. B. Fowler, supplied 16 oz. of the liquor ferri perchlor on the doctor's instructions. A chemist may suggest a substitute, but the decision rests with the doctor. In any event, the doctor ordered the quantity, 16 oz., from Mr. Fowler, who had no authority to send by the mother the dialysed iron. This action added to the doctor's prescription. He should have telephoned the doctor before handing the dialysed iron to the mother. It was intended to reach the doctor—it didn't. The course of events would have been changed had the chemist rung the doctor.

Doctor Mellows, faced with treatment of case of acute arsenical poisoning, turned to Hale White Materia Medica, a recognised authority. The symptoms and treatment are given in about twenty lines—simple and straight forward. He did not follow the instructions. He failed to wash the stomach or empty it. Liquor ferri perchlor, which he ordered to be administered, is not a recommended antidote, it is used for other purposes. The maximum safe dose for an adult is fifteen minims or drops. Dialysed iron is an antidote—it was available—it was not ordered by the doctor. I am satisfied it is normal practice for the stomach wash to be done by the sister. The doctor was notified patient's condition about 9.30 p.m., and told that the patient was vomiting.

"I find that Hilary Margaret Brown died at Merredin District Hospital, 30/12/54, from asphyxia caused by disturbance of the acid alkaline balance by ferric perchloride administered on instructions of Dr. Mellows."

## PHARMACEUTICAL COUNCIL

### Monthly Meeting

The 688th meeting of the Pharmaceutical Council of Western Australia was held at Perth Technical College on June 7, at 7.30 p.m.

**Present.**—Messrs. R. I. Cohen, H. D. Fitch, R. W. Dalby, A. C. McWhinney, E. J. Nicholas, A. A. Baxter and F. W. Avenell (Registrar).

**Correspondence.**—To and from K. G. Attiwill and Premier's Department, re pharmacists' service in Civil Defence. It was agreed to discuss the matter with the Commissioner of Public Health, as suggested by the Premier's Department. The President, Registrar and Mr. E. J. Nicholas to act as representatives.

From the Pharmaceutical Society of Great Britain, advising that they propose to re-examine the question of reciprocal recognition in five years time.

From Commissioner of Public Health, enclosing request from Director-General of Health that Primaquin be supplied only on prescription. It was decided to reply asking for information as to the control of this substance in other States.

From Police Department, notifying a death from Acetyl-Salicylic Acid poisoning.

From Registrar-General, advising death of A. V. Parkes, at St. John of God Hospital, Belmont, on 16/3/55.

**Indentures Registered.**—Sister J. M. Forde to Miss E. Dick; A. J. Hinds to Mr. H. Arnold; J. B. Walker to Mr. G. M. Wiley.

It was noted that six indentures which had been suspended on January 4, had been resumed on April 4.

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with the  
lifebuoy's  
help

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## WESTERN AUSTRALIA—Continued

**Medical School Appeal.**—The President was authorised to confer with the President of the Guild and issue a joint appeal for funds for the proposed Medical School.

**Examination Fees.**—The following scale of fees was agreed to:

Entrance exam. . . . .	£3 3 0
Single subject . . . . .	£2 2 0
1st, 2nd and 3rd years . . . . .	£3 3 0
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Single subject . . . . .	£3 3 0

(Maximum as for full exam.)

A new scale of Examiners' allowances was also agreed to.

**Financial.**—Accounts totalling £430/10/5 were passed for payment.

## OPERATION BROTHERHOOD

Operation Brotherhood, sponsored by the Junior Chamber of Commerce to provide relief in Vietnam, is attracting much notice.

Since the cease-fire in Vietnam over 750,000 refugees have left the Communist-controlled north and trekked south to Saigon, where they are now congregated in tents, awaiting resettlement and rehabilitation.

Jaycees from the Philippines, appalled by the dreadful conditions and poor state of health of the mass of refugees, were quick to organise volunteer teams of



Two volunteer Filipino doctors—Gloria Remulla and Vicente Villanueva—get ready to start a busy day at a makeshift "Brotherhood" clinic in Bien Hoa. Note crowd waiting outside to be treated for ailments ranging from malnutrition to skin diseases.

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# TASMANIA

## PERSONAL and GENERAL

### State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in Tasmania, Miss M. L. Williams, 276 Argyle St., North Hobart (phone B 1010).

Among the guests at Miss Heather Menzies' wedding in Canberra were Mr. and Mrs. Athol Townley, who have recently returned from a trip abroad.

We regret to hear of the retirement of Mr. Fred Fairthorne, but hope that the rest from business worries may help to restore him to health again.

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Mr. T. P. Tighe has retired from pharmacy in Tasmania after having conducted his pharmacy at New Town for many years. To Mr. John Koffman, who has taken over the pharmacy, we extend our best wishes in his new venture.

## PHARMACY BOARD

### Monthly Meeting

The Pharmacy Board of Tasmania met at 85 Elizabeth street, Hobart, on May 23, at 8 p.m.

**Present.**—Miss M. L. Williams, Messrs. F. H. Cartledge, A. G. Gould, J. M. Beaumont, I. B. McLeod, and the Registrar.

**Chairman.**—Mr. F. H. Cartledge was elected to the Chair.

**Pharmaceutical Register.**—Raymond Lawrence Ward (ex N.S.W.) and John Leyland Otto (ex South Australia) were registered.

**Apprentices.**—Charles Bacs: A reply was received from the Pharmacy Board of N.S.W. advising requirements for admission in that State in such a case. Members decided that Mr. Bacs would be admitted as a registered pharmacist in Tasmania, after satisfying this Board in the Final Examinations in oral Posology and Toxicology, oral prescription reading and dispensing. Also to serve a period of two years in an open pharmacy in Tasmania.

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Mr. Cartledge reported that Mr. G. A. Calver would be examining in Posology and Toxicology—written—and Mr. Bevan Browne in Prescription Reading—written—at the June examination.

**Finance.**—The financial statement showed a balance of £1271/14/1, and accounts totalling £124/16/5 were passed for payment.

**Pharmacy Act.**—A letter was received from Messrs. Finlay, Watchorn, Baker and Solomon stating that they would act as solicitors for this Board.

Advice was received that Mr. H. A. Haddon had cancelled his partnership.

The advertisement received from Burnie which had been submitted to the Pharmaceutical Society for consideration had been considered by the Society, who advised that they did not regard the advertisement as being unethical.

**Reciprocity with Great Britain.**—A letter was received from the Pharmaceutical Society of Great Britain advising that various other Boards of Pharmacy were unable to agree on the proposal of the minimum standard for reciprocal registration being a course of a study comprised of three academic years of full-time training in a university or similar institution in addition to a period of practical training. The Council would therefore reconsider the matter in five years' time.

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**Primaquin.** A letter was received from the Director of Public Health asking what control was exercised over this drug. The meeting decided that it was not controlled in Tasmania.

**Mercurous Chloride.** A copy was received of the amendment of the Food and Drugs Regulations showing that teething, soothing and any infant powder and similar preparations containing Mercurous Chloride could only be sold on the written prescription of a legally qualified medical practitioner.

**Marzine.** Advice regarding this drug was still awaited from Victoria.

The meeting closed at 9.30 p.m.

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**Apprentices.**—Ian Blair Gamble with Ian Bruce McLeod: The mutual consent of all parties for the cancellation of these indentures was received and cancellation approved.

**Examiners' Meeting.**—The meeting decided that a meeting of the Examination Committee should be held on July 11, to be followed by a Special Board meeting to consider examination results.

**L. Fairthorne & Son.**—The President reported that he had forwarded a telegram to Mr. F. F. Fairthorne, conveying best wishes of the board on the occasion of a farewell dinner, which was being tendered to him on his retirement from Pharmacy in Tasmania.

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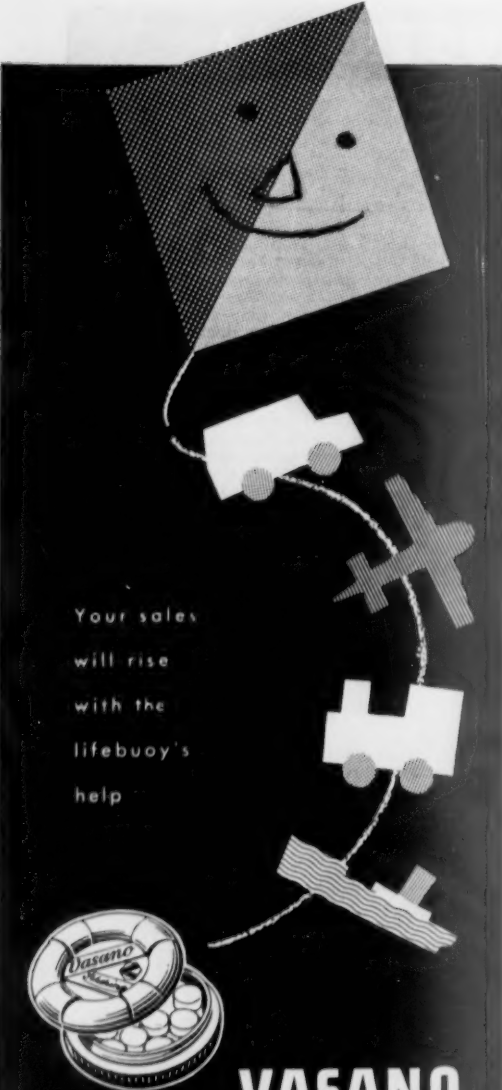
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**Uniform Poisons Legislation.**—A request was received from the Director of Public Health for the allo-

## TASMANIA—Continued

cation of drugs to the proposed eight Schedules. Mr. Shield undertook to attend to this allocation as soon as the reprint of the Poisons Act was received.

**Inspector.**—Mr. Pearce reported the death of Colonel A. A. Evans, who had been Inspector to this Board for the past two years. The President said his passing would be a great loss to this Board.—A letter of sympathy had been sent to Mrs. Evans.

The Registrar was instructed to advertise for a person to fill the position of Inspector, part time, at a rate of £3 per day, plus expenses, for approximately 72 days a year.

The meeting closed at 10 p.m.

### PHARMACEUTICAL SOCIETY

#### Council Meeting

The Council of the Pharmaceutical Society of Tasmania met at 85 Elizabeth street, Hobart, on June 7, at 6.15 p.m.

**Present.**—Mr. E. H. Shield (President), Miss E. L. Knight, Messrs. A. G. Gould, K. H. Jenkins, A. P. Brammall, C. A. Robertson, and the Secretary.

**H. H. Pearce Essay Competition.**—The Secretary reported that advice had been forwarded to all eligible students regarding this competition.

**Practice Dispensing.**—Mr. Gould reported that the five final students for the next examination attended the Practice Dispensing, which was considered most satisfactory.

**Headquarters of Society.**—Advice was received from Mr. C. P. Roots that a meeting of northern members of the Society was called for May 4, for the purpose of considering if they desired to have the headquarters of the Society transferred to Launceston. As there were insufficient members present to form a quorum, he assumed that northern members were not interested in the proposed transfer.

The meeting decided that in the circumstances no further action could be taken at the present time.

**A.P.F. 1955.**—The first batch of galley proofs of the 1955 edition of the A.P.F., which had been distributed amongst members for checking, were considered, and Miss Knight undertook to peruse the complete set before returning same.

**Reciprocity with Great Britain.**—Advice was received from the Pharmaceutical Society of Great Britain that various Boards of Pharmacy were unable to agree to the proposal that in future reciprocal registration should be applicable only if the course of study for qualification comprised three academic years of full time training in a university or similar institution, in addition to practical training. The British Council had further decided to re-examine the whole question in five years' time.

Discussion followed as to the progress that had been made in regard to the recommendations made by the Pharmaceutical Advisory Committee. The Secretary was instructed to write to the Director of Technical Education advising that this Society considered it desirable for an approach to be made to the Minister for Education by representatives from our three bodies, and to ask if correspondence regarding decisions of the Committee had been dealt with.

**Federal Council of Pharmaceutical Societies.**—Acknowledgment of Miss Knight's appointment as representative on this Council was received from the Secretary. Miss Knight advised that she had received a letter from the Secretary setting out the objects of the Federal Council, and the steps it proposed to take in the future.

It was decided that further consideration be given to this matter.

**Post-Graduate Lecture.**—Mr. Shield reported that he had communicated with Mr. G. K. Treleaven, of D.H.A. (Vic.) Pty. Ltd., regarding the possibility of his addressing our Tasmanian members.

Mr. Treleaven advised that he was willing to address members both in Hobart and in Launceston, and that his principals were willing to allow him time off to do this, and that our only expense would be his travelling and hotel expenses.

Members ratified the President's action in arranging these lectures, and decided that the most desirable time would be during the week commencing July 18.

Arrangements were left for Mr. Shield to finalise.

**Teaching Facilities.**—Miss Knight reported that she understood the Students' Association were concerned regarding the conditions at the Technical College for the pharmaceutical students. The conditions were described as "most unsatisfactory." After three years, facilities were now in a worse state than at the beginning, despite assurances that had been given for better arrangements.

Miss Knight suggested that if Dr. Burgin was agreeable the Pharmacy Board might be prepared to allow him to use their dispensary for the teaching of dispensing.

This matter was left for the Secretary to discuss with Dr. Burgin.

The meeting closed at 7.30 p.m.

### THE GUILD

#### S.B.C. Meeting

The Executive of the Tasmanian Branch of the Guild met at 73 Liverpool street, Hobart, on May 26, at 8 p.m.

**Present.**—Mr. G. M. Fleming (Chairman), Messrs. A. G. Gould, K. H. Jenkins, J. H. Gould, C. A. Robertson, C. B. Dillon, L. W. Palfreyman, D. R. Crisp and Secretary.

**Medical Benefits Fund.**—A letter was received from the Medical Benefits Fund advising that a rubber stamp would be applied to all renewal notices, advising members to pay through chemist agents.

The Secretary reported that he had communicated with the Manager, who advised that commissions were not credited to chemist agents when annual subscriptions were paid direct to the fund, as it would involve considerable work in trying to record such changes in payments.

After discussing the commission allowed to agents, the meeting decided that if this matter was not already scheduled for the next Federal Council meeting, a remit should be forwarded from this Branch.

**Telephoned Subscriptions.**—Advice was received from the Chief Pharmacist advising that a circular had been sent to all Medical Practitioners drawing their attention to the regulations covering the supplying of written prescriptions following the phoning of such to a chemist.

Members reported that they were still having difficulty with one doctor. The meeting decided that if outstanding prescriptions were not cleared up by the end of the month, a further communication should be sent to the Chief Pharmacist.

**Sales Tax.**—Advice was received from the Federal Secretary giving details of an application for the removal of sales tax from certain items.

**Commonwealth Health Department Inquiries.**—A letter was received from the Federal Secretary covering a proposal from Pharmaceutical Defence Ltd., for the publication of an article for the guidance of members in procedure to adopt when interviewed by an Inspector of the Health Department. Members approved of the

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# ***Cuddly Duck*** **AND** ***Tommy Tiddler***

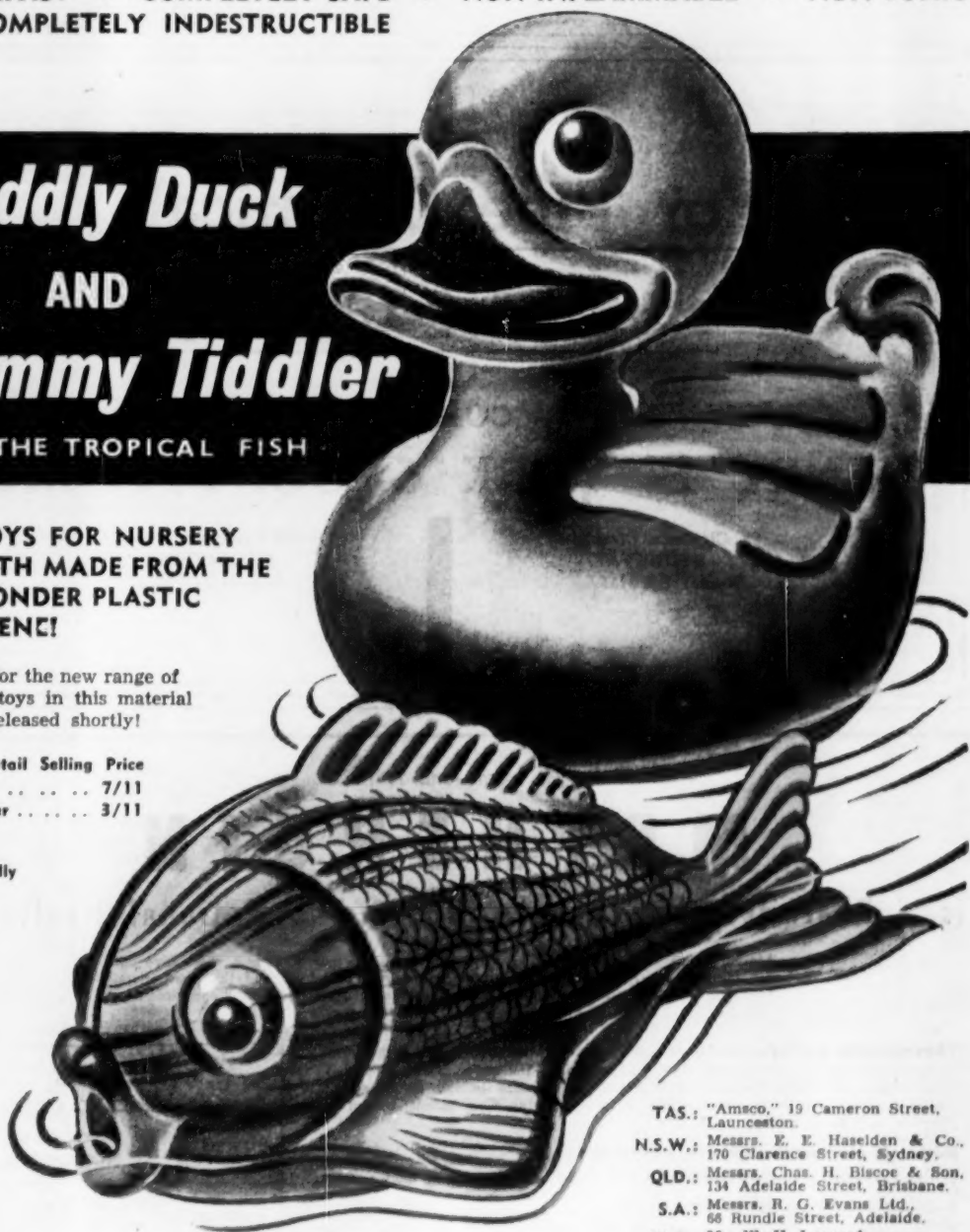
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NEW WONDER PLASTIC  
POLYTHENE!**

Watch for the new range of  
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to be released shortly!

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Tommy Tiddler . . . . . 3/11

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QLD.: Messrs. Chas. H. Biscoe & Son,  
134 Adelaide Street, Brisbane.  
S.A.: Messrs. R. G. Evans Ltd.,  
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## TASMANIA—Continued

proposal, but felt that the "Australasian Journal of Pharmacy" was not the proper means for conveying such advice, and that it should be sent to members in a confidential circular, or through the "Gilseal News."

**Mother's Gift Day Packs.**—Advice was received from the Federal Merchandising Manager that the late distribution of Mother's Day Gift Packs by Potter & Moore was due to the hold-up of shipping.

**Veterinary Lines.**—The Federal Merchandising Manager advised that Glaxo Laboratories do maintain a Chemists Only policy for certain packs, but other products of a veterinary type are open sellers, some because the Guild already has a contract for similar products of other manufacturers.

**Merchandising Competition.**—Results of the Merchandising Competition were discussed. Members felt that it only required a little more drive for Tasmania to come out on top.

**Transistor Hearing Aid.**—Details were received from the Federal Merchandising Service regarding the new "Vox" hearing aid to be issued in July.

**Trade and Commerce Conference.**—The Federal Merchandising Manager advised details of a two-day Federal Trade and Commerce Conference to be held in Melbourne. Mr. C. A. Robertson was appointed as our delegate.

**Pricing Officers' Conference.**—Mr. Dillon stated that he had received advice from the Federal Secretary that a Pricing Officers' Conference would be held in the first week in September, but he regretted he would be unable to attend. Although no appointment of another delegate to take Mr. Dillon's place was made, it was decided that a representative would attend.

The following points were suggested for inclusion in the agenda of this conference:—

(a) After a P.B.A. prescription has expired as such and it becomes a private script, it should be charged for at Guild rates, and not at P.B.A. rates.

(b) All prices issued by Wholesalers should show the approved Guild rate, and not a P.B.A. rate.

(c) A direction be issued to chemists on the pricing of broken quantities, including examples.

(d) The necessity for prompt advice to members of any price variations.

**Spectacle Lenses.**—Advice was received from the Australian Optometrical Association that on occasions Pharmacists were sending spectacles to wholesalers for replacement of lenses on behalf of their clients.

The meeting decided to publish sections from the Opticians' Act in the next "Gilseal News."

**Australian Newsprint Mills Contract.**—A request for information which would account for the increase in the annual cost of medicine supplied to members of the A.N.M. Council was received from their Secretary by Mr. Crane.

The letter also suggested that a meeting of the New Norfolk chemists, together with Council representatives, be held to discuss these matters, and also to consider the increase in the percentage discount from 8.1-3 to 15 per cent.

The meeting decided that Mr. Fleming should discuss this matter with Mr. Crane, and that discussions with the A.N.M. representative should be carried out by representatives of the Guild, who were the original

contracting body. Mr. Fleming and Mr. Palfreyman agreed to handle this matter.

**Analysis of Prescriptions.**—The Secretary was instructed to approach Mr. C. S. Priest, inquiring if he would undertake analyses for members of test prescriptions made under the P.B.A. or P.M.S.

**Annual General Meeting.**—Members considered that the annual general meeting should be held at Campbell Town this year, and that a number of members should be encouraged to stand for the State Branch Committee at the next election.

**Farewell to Mr. J. H. Gould.**—Mr. Gould thanked members for the farewell dinner that had been given to himself and Mrs. Gould, as he would be sailing for England during the next week-end. He stated that this would be his final attendance at an Executive meeting as he would not be accepting nomination for the next election.

Mr. Fleming expressed appreciation for the long and devoted service which Mr. Gould had given to pharmacy, as he had seldom missed a meeting. Mr. Gould had established an unrivalled service to pharmacy in this State, since he was a member of the Hobart Chemists' Association before this body was merged in the Guild.

All present wished Mr. and Mrs. Gould bon voyage.

The meeting closed at 10 p.m.

## BARBITURATE AND ASPIRIN POISONING

"The immediate treatment given by the general medical practitioner is infinitely more important than anything that can be done some hours later," say T. J. Thomson and S. Alstead, discussing the treatment of barbiturate and aspirin poisoning in the British Medical Journal for April 23, p. 1022. The relative who 'phones for the doctor should be told how to give first aid. This consists in making the patient vomit. If the patient is conscious—even though drowsiness is developing—vomiting can nearly always be induced by boldly thrusting a finger down the patient's throat. The vomitus should be collected in a clean pail for examination later. After vomiting has occurred, the patient should be made to drink two cupfuls of warm water, and then digital stimulation of the fauces should be repeated. This procedure is invaluable when repeated three or four times, and is much more rapid and reliable than the use of reflex emetics.

In hospital, artificial respiration and adequate oxygenation may maintain life until most of the barbiturate in the tissues has either been excreted or destroyed. The patient then gradually emerges from coma, and normal breathing is resumed. This phase of treatment can be shortened by giving analeptics such as amphetamine sulphate and picrotoxin. At the moment it would be difficult, say the authors, to assess the value in general practice of the new barbiturate antagonist N.P. 13 (, -methyl-ethylglutarimide).

If the patient's stomach can be washed out within an hour of his swallowing aspirin tablets, the chances of serious constitutional upset are negligible. The acidosis is best treated by giving Ringer-lactate solution B.P. intravenously. At the same time, if the patient is co-operative and can tolerate fluid by mouth, he should be encouraged to drink water, tea and coffee. Two teaspoonfuls of baking soda, in divided doses, can be given during the first two or three hours of treatment.—Extract from "The Pharmaceutical Journal," May 7, 1955.

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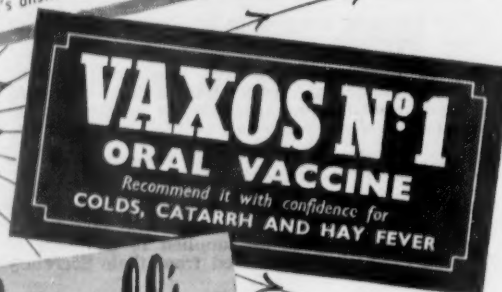
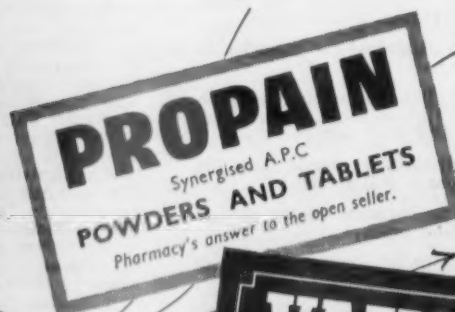
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# NEW SOUTH WALES

## PERSONAL and GENERAL

## State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in N.S.W. Phone BU 3092.

*Why does a wild goose chase so often end in a mare's nest? And why is idle curiosity always so busy?*

**Mr. K. J. Davies** has opened a pharmacy in Sargood street, O'Connor, A.C.T.

**Mr. A. W. Fussell**, of 507 Dean street, Albury, has sold his pharmacy to Mr. P. N. Wallace.

**Mr. J. J. Hodge**, late of Carlton, has sold his pharmacy to Mr. P. J. Killalea.

**Mr. W. J. Gleeson** is the owner of the pharmacy previously conducted by Mr. K. J. Smith at Chester Hill.

**Mr. K. L. Southwick**, of 257 Windsor street, Richmond, has sold his pharmacy.

**Mr. Remo Bisaro** has opened a pharmacy in Anderson avenue, Panania.

**Lorking's Pharmacy** at Balgowlah has been sold to **Mr. R. E. Anthony**.

**Mr. W. R. Willcox** has purchased Mr. R. E. Anthony's pharmacy at 303 Beamish street, Campsie.

**Mr. P. J. Byron** has purchased Mr. B. V. Hayes' pharmacy at 18 Booth street, Annandale.

**Mr. H. M. Cox** has purchased Miss M. N. Tomlin's pharmacy at 148 Blues Point road, McMahon's Point.

**Mr. C. J. T. Hooke** has purchased Mr. R. N. Osborn's pharmacy at Toukley.

**Mr. L. L. Foran** has the pharmacy at 323 Kingsway, Caringbah, Mr. Foran was previously in business at Earlwood.

**Mr. Phillip Berner**, of Sussex Inlet, has been appointed as an Honorary Ranger under the Fauna Protection Act. Mr. Berner formerly had a pharmacy at Wollongong.

**Obituary**.—It is recorded with deep regret that **Mr. W. L. Murphy**, of Tamiworth, has passed away.

## VETERINARY EXAMINATION

An examination will be held in September for veterinary graduates from foreign countries who wish to qualify for practice in New South Wales.

## PHARMACY BALL, 1955

The 1955 pharmacy ball will be held at the Trocadero on Monday, August 1.

Tickets will shortly be available from the Society's rooms, "Science House," 157 Gloucester street, Sydney; price £1/1/-.

## POISONS ADVISORY COMMITTEE

A recent issue of the N.S.W. Government Gazette publishes an announcement of the appointment of Mr. S. E. Wright as a member of the Poisons Advisory Committee, vice Mr. J. L. Townley, representing the Pharmacy Board of N.S.W.

## "LISTEN"

A doctor in the south-western suburbs has a notice pinned to his surgery door: "Under no circumstances will the plea, 'Can I fix up on Friday, etc.?' be accepted. All patients must pay at the time."

—Sidney Mann, "Mirror," 24/5/55.

## IS THERE A CHEMIST IN THE HOUSE?

At the sitting of the Medical Board of Disciplinary Tribunal yesterday, Dr. H. J. Foley, of Glebe, paused in the witness-box and said: "Sorry, I can't read my own writing."

—Column 8, "S.M.H.," 18/6/55.

## COMING EVENTS

**"What the Dermatologist Wants from the Pharmacist."**—This is the title of a lecture to be delivered by Dr. Adrian Johnson in the Stawell Hall, 145 Macquarie street, Sydney, on July 26, at 8 p.m. The lecture has been arranged by the Society's Science Group, and may be attended by any person associated with pharmacy.

**Pharmacy Ball.**—The 1955 Pharmacy Ball will be held at the Trocadero on Monday, August 1. Tickets are available from the Society's rooms, "Science House," 157 Gloucester street, Sydney, price £1/1/-.

## IMPORTANT ZONE MEETING AT LISMORE

An important meeting will be held in the Apollo Hall at Lismore on Sunday, July 17, commencing at 11 a.m. The purpose of the meeting is:

1. To give pharmacists an opportunity to ventilate and discuss any grievance or criticism they may care to make concerning the work of the P.B. and P.M.S. schemes.

2. To enable departmental officers to draw attention to any laxity on the part of chemists.

3. To explain why any particular regulation which may be considered irksome by pharmacists is necessary.

A bumper attendance is expected at this meeting.

## POST-GRADUATE LECTURES, 1954-55

The Society Council is considering a proposal to make copies of the lectures available to country members upon payment of a fee of £1/1/-.

Would country members please indicate if they would like copies of the lectures on Pharmacology delivered in 1954 by Professor Thorp and an associate, and also copies of the lectures now being delivered by Mr. S. E. Wright, which deal with pharmacy and pharmaceutical chemistry, and follow on from the lectures delivered the previous year.

If sufficient country members request the lectures, they can be specially printed. If there is insufficient demand it would, of course, not be economical to print them.

## CURRENT AFFAIRS BULLETIN

Current Affairs Bulletin is a 16-page booklet published fortnightly by the Department of Tutorial Classes, University of Sydney. The contents cover a wide variety of subjects. Recent issues, for example, have included articles on Australian food production, India, Pakistan and other Asian countries and many Australian social and economic problems. The subscription to C.A.B. is 12/6 a year, post free. There are special reduced rates for bulk subscriptions (two or more copies posted to any one address).

Single issues may be obtained for 6d. a copy, post free.

All subscriptions and inquiries should be addressed to The Director, Department of Tutorial Classes, University of Sydney.

## BENEFIT BODIES ORGANISE

Registered hospital and medical benefits organisations will form a N.S.W. association.

Decision to form the association was made at a recent meeting in Sydney attended by 33 of the 37 State registered organisations.

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## NEW SOUTH WALES—Continued

These included the Hospitals Contribution Fund of N.S.W., Medical Benefits Fund of Australia and friendly society and industrial benefits organisations.

Director of the Hospitals Contribution Fund, Mr. R. A. Miller, was nominated chairman of the association.

Mr. A. J. Eade, Federal President of the Friendly Societies' Association, was nominated secretary.

A committee of 12 was appointed to draft a constitution.

Officials declined to state what matters might be raised at early meetings of the association.

It is expected that these will include recent complaints of wrong ward classification of public hospital patients and illegal charging of public ward patients by doctors.

### THE LATE PERCIVAL DUDLEY BELCHER

Percival Dudley Belcher, who passed away on May 1, 1955, aged 75 years, after only four days illness, was born in Adelaide in 1880.

He was apprenticed to Mr. Eival, of Rundle street, Adelaide, attended the Adelaide University and qualified the youngest chemist in Australia. He won the University Gold Medal in 1901. He went to manage Skewes' Pharmacy in Port Pirie the same year.

In 1903 he joined Burroughs Wellcome & Co., and became their Interstate representative.

He was married in 1905 to Miss Eunice Williams, of Port Pirie, who travelled with him until he went into retail business in Miller street, North Sydney.

He enlisted from there in the Artillery, but was later put into the Chemists' Contingent that went to India.

After the war he bought Mr. Baker's business in Parkside and later sold it to Mr. Letcher.

He then joined Rushton and Burton, of Hobart, and opened as a partner in Hobart, later returning to Sydney and was well known as a chemist in Gordon for over 20 years.

He had one daughter, Beth (Mrs. W. A. Carter), who is also a chemist.

Mr. and Mrs. Belcher celebrated their Golden Anniversary only three months ago, and had a holiday in Melbourne.

The funeral service was held at the Congregational Church, Killara, the Rev. Bostock Jones officiating, and later a Masonic Service was held at the Crematorium.



Mr. P. D. Belcher.

### WARNING ON NAMES OF MEDICAL FUNDS

The Minister for Health, Sir Earle Page, said that two medical benefit companies had been made to change their names and the Federal Government hoped to make a third do so.

He was replying in the House of Representatives to Mr. C. W. Davidson (C.P., Q.).

Mr. Davidson said the public had been deluded into joining some organisations in the belief that they would receive full benefits under the Commonwealth Health Scheme.

He asked what the Government had done to deal with "these imposters."

Sir Earle said the principal means of deceiving the public was by the use of the term "Commonwealth" at the beginning of the organisation's name, suggesting that it was part of some Federal Government organisation.



#### Companies Named

"The Commonwealth Health Benefits Australia Limited has been forced to change its name to the Contributors' Health Benefits Proprietary Limited," Sir Earle said.

"The Commonwealth Hospital and Medical Benefits Limited will change its name to the Commercial Hospital and Medical Benefits Limited.

"There is still one organisation which is worrying us—the Federal Health Benefits of Australia.

"We hope to have its name changed..

"All these organisations, as any company is which complies with the laws of company registrations, are entitled to carry on their activities, but everything possible is being done to prevent the public from being deluded by them."

#### BODY TO SELECT FOREIGN DOCTORS

Sydney University has been asked by Health Minister O'Sullivan to submit nominations for appointment to the Examining Medical Committee which will deal with employment of foreign doctors in N.S.W.

Mr. O'Sullivan will create the committee when he receives the nominations.

Legislation last March provides for the registration of foreign doctors to serve in State mental hospitals, institutions for the aged and infirm and in public hospitals if local doctors are not available.

After five years service the doctors can be registered for private practice anywhere in the State.

The medical committee will decide on the suitability for employment of foreign doctors who apply to have their names placed on a special waiting list.

The legislation applies only to doctors who were resident in N.S.W. on January 1, 1954, and have been here continuously since. Their skill as doctors and their knowledge of the English language will be essential factors in their selection.

The system will obviate need for doctors to complete fourth, fifth and sixth years in medicine at Sydney University before they can be registered in this State.

So far 15 foreign doctors have applied to be placed on the waiting list. But it is estimated about 120 will be available for selection.

Since 1939 when the Medical Practitioners Act was amended to permit registration of foreign doctors under various categories, about 140 have been registered.

Of these about 95 have become eligible by completing the final three years of the course at Sydney University.

#### FIVE CHILDREN SWALLOW POISON

Five children aged between one and three were treated for poisoning in five days at St. George's Hospital recently.

Two of the children swallowed potassium chromate. The others swallowed kerosene, disinfectant and insecticide tablets.

John Halls, aged one year, of Connell's Point road, Hurstville, was admitted to hospital after he drank a quantity of kerosene.

Suzannah Muller, aged three, and her brother, Max, aged two, of Woolooware road, Cronulla, swallowed potassium chromate. They were treated by a local doctor and then taken to hospital.

Letitia King, aged two, of Saunder's Bay road, Caringbah, swallowed insecticide tablets.

Vince Grace, aged two, of Parramatta street, Cronulla, drank a quantity of disinfectant.

St. George Ambulance took all the children to hospital.

The New South Wales representative of the National Safety Council of Australia, Mr. A. E. Dent, said: "Probably these poisonings need not have occurred. People must learn that they must put poisonous preparations out of reach of young children. Most children are natural imitators. If they see their parents take tab-

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## NEW SOUTH WALES—Continued

lets from a bottle and swallow them they will do the same.

"It is not good enough for parents to put poisonous preparations on shelves or on top of cupboards. These preparations must be put away under lock and key and the hiding place of the key should be changed frequently," he said.

"In this way parents can safeguard the lives of their children."

### APPEAL BY DOCTOR IS UPHELD

An appeal by a doctor against a conviction on a charge of having failed to keep a record of all drugs used was allowed by Judge Holden in Parramatta Quarter Sessions Appeals Court on June 1.

The doctor, James Fraser Boag, of Garfield road, Riverstone, was fined £20 at Parramatta Court of Petty Sessions on July 22, 1954, on a charge under the Police Offences (Amendment) Act.

In quashing the fine and conviction, Judge Holden said he would apply Section 556A of the Crimes Act, and directed that no conviction be recorded against Dr. Boag.

His Honour said it was obviously a technical matter, and there should be no mark recorded against the doctor.

Mr. Clive Evatt, Q.C., for Dr. Boag, said that where a doctor had complied with the provisions of the Commonwealth Pharmaceutical Act, he was not also obliged to comply with the provisions of the Police Offences (Amendment) Act relating to drugs. He said the doctor had complied with the provisions of the Commonwealth Act.

Mr. Evatt said Dr. Boag's omission was a technical one involving no suggestion of culpability.

Mr. Clive Evatt, Q.C., and Miss Elizabeth Evatt, instructed by Messrs. William Walker and Son, for Dr. Boag; Mr. J. E. O'Toole, instructed by the Clerk of the Peace, for the Crown.

(Under the Police Offences (Amendment) Act, medical practitioners are required to enter in a register a list of all proclaimed drugs in their possession or used by them.)

Under the Commonwealth Pharmaceutical Benefits Act, medical practitioners are authorised to prescribe certain drugs which can then be obtained by the patient on the doctor's prescription and signature.

The chemist retains one copy of the prescription and the other is forwarded to the Commonwealth health authorities.)

### CHEMIST AND DOCTOR GAOLED ON CONSPIRACY CHARGE

A chemist and a doctor were each sentenced to 12 months' gaol by Mr. Justice Brereton in Central Criminal Court, Sydney, on June 27.

They had been remanded for sentence after having been found guilty by a jury on June 24 of having conspired to defraud the Commonwealth under the free medicine scheme.

The men are Ronald McKenzie Beesley, 31, chemist, of Enmore road, Enmore, and Dr. Morris Seifert, 40, of Bay street, North Bondi.

The jury acquitted another doctor and another chemist of similar charges; they were Dr. Rellie George Skinner, 38, of Golf Links road, Killara, and Reginald William Rowley, 50, chemist, of Anzac parade, Kensington.

The Crown had alleged that the four men had entered into a conspiracy to defraud the Commonwealth of large sums of money by submitting false claims under the free medicine scheme, between September, 1950, and December, 1951.

At that time, Dr. Skinner and Dr. Seifert were in

partnership in Enmore, and Beesley managed Rowley's chemist shop near their surgery.

The four men had pleaded not guilty.

In sentencing Seifert and Beesley, Mr. Justice Brereton said: "The free medicine scheme offers a fine field for the unscrupulous. It presents abundant opportunities for cheats and frauds.

"The regulations controlling it contain few safeguards against dishonesty, principally no doubt because its implementation lies in the hands of doctors and chemists.

"Such men rank high in our community, and one expects that they will be trusted.

"If they break the trust reposed in them, they cannot expect clemency.

"When men who, because of their status in the community, should and necessarily do, set an example to others, it is idle to whimper that this is their first offence.

"There are no really mitigating circumstances, although the result of the crime may have already been disastrous, at least to Seifert.

"I realise, too, that these men probably spent more on their defence than they ever made out of their frauds.

"I am conscious that their chosen professions may now be closed to them forever.

"Seifert was earning over £2000 from his practice. Beesley was being paid £1000 with such prospects that after the investigation started, his salary was increased to £1500.

"They were driven to crime only by greed. For these men, however, the fact of the gaol sentence is of greater weight than its duration."

Appearances: Mr. R. L. Taylor, Q.C., and Mr. R. G. Reynolds (by the Commonwealth Crown Solicitor) for the Crown; Mr. A. H. S. Conlon (by Lightoller, Talty and Brooke) for Dr. Seifert; Mr. A. J. Goran and Mr. R. P. Vine-Hall (by Lorton, Duke and Co.) for Beesley.

#### CHALLENGES TO DENTAL BOARD DISMISSED

The State Full Court on June 3, dismissed three challenges to the jurisdiction of the Dental Board of New South Wales.

The challenges arose out of applications by dentists who appeared before the Board.

Michael Dennis Murphy, of Victoria street, King's Cross, and Leslie Daniel Berry, of Macquarie street, Sydney, had applied for a writ of prohibition to restrain the Board and E. F. Hewlett, Secretary of the Australian Dental Association, from proceeding with a complaint made by Hewlett last December.

Evidence was taken, but before the Board considered the matter of a rule nisi for prohibition was obtained on the grounds that certain members of the Board sitting were members of the Australian Dental Association.

Subsequently another ground for prohibition was taken by Murphy and Berry, alleging that four elected members had not been duly elected according to the Dentists' Act.

Consequently, it was submitted, the Board had no jurisdiction to hear Hewlett's complaint.

The Dental Board consists of eight members, the Dean in the Faculty of Dentistry, the president of the Dental Hospital, two Government appointees (a qualified medical practitioner and a barrister or solicitor) and four elected by registered dentists.)

The point as to jurisdiction in the Full Court was on the election of the four members.

Ivan Richards, a registered dentist, who was also proceeded against by an inspector appointed under the Dentists' Act, applied to the Court for a writ of certiorari (to bring proceedings into a higher Court).

The Board had found him guilty of professional misconduct.

The Full Court held that the candidates for election to the board were elected in accordance with the regulations.

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## NEW SOUTH WALES—Continued

The election was not invalid and the Board was properly constituted by poll on June 23, 1954.

Murphy and Berry were directors of a company dealing with artificial dentures.

Advertisements had informed the public that dentures could be obtained through a qualified dentist from the company.

It was suggested that the operations of the company infringed certain provisions of the Act and Regulations.

The Court continued that Murphy and Berry were charged with professional misconduct that as directors of the company they associated themselves with a person (the company), not a registered dentist carrying on the practice of dentistry.

The objects of the Board of maintaining the honour of the dental profession were undoubtedly proper and laudable.

"It must be kept clearly in mind that the charges against Murphy and Berry are based upon a plan of advertising, and not on attempts to cheapen cost of dentistry to the public," the Court said.

"The challenges to the Board on the ground of bias in those members who are also members of the Board fails."

## INTERSTATE GOLF WEEK IN SYDNEY

During the first week of May a party of 30 members of the Victorian Chemists' Golf Club and four members of the Queensland Chemists' Golf Club visited Sydney for the Australian Chemists' Golf Week. A very enjoyable time was had by all, and although a downpour of 7 inches of rain fell in Sydney on the Saturday and Sunday nights before play commenced, weather conditions for the week were ideal for golf.

A very high standard of play was a feature of the week. The Australian Chemists' Singles Championship was won for the third time by Laurie Skinner, of Sydney, who turned in a really creditable performance, scoring 38 stableford points off scratch with a stroke round of 70 on the tough Australian Golf Club layout.

The teams match, N.S.W. versus Victoria, was a really interesting contest, and resulted in a very close win for N.S.W.—4 matches to 3—the results as follows:—

- L. Skinner beat M. Turnbull 2 and 1.
- J. Cohen lost to M. Ross 3 and 2.
- W. Bourke lost to R. Kolby 4 and 3.
- W. Timony beat G. Fawaz 3 and 1.
- H. Eisenberg lost to P. Cornell 6 and 5.
- S. Robertson beat A. Hallett 6 and 4.
- W. McPherson beat H. Herdman 3 and 2.

As a grand finale to a week of good fellowship, a dinner was held at the Australian Golf Club on the evening of May 6, where 100 members of the Australian Chemists' Golf Club had a thoroughly enjoyable night's entertainment to round off a memorable week.

The following are the results of the various golf days during the week:—

### Monday, May 2—Monash

**Four Ball Stableford:** M. Ross (Vic.) and C. Costello (N.S.W.) on a count back, 41 points.

**"A" Grade.**—H. Eisenberg, 36 points.

**"B" Grade.**—C. Fisher, 36 points.

**"C" Grade.**—B. Bay, 28 points.

**Interstate Visitors' Trophy.**—T. Henshall, 31 points.

### Tuesday, May 3—Australian Golf Club

**Four Ball:**

Winners, Laurie Skinner (2) and Frank Mont Egano (8) 45 points.

Runners-up, Brian Daly (4) and Monty Ross (3), 38 points.

**"A" Grade.**—Bill Timony (6), 31 points.

**"B" Grade.**—Wally Gear (11), 31 points.

**"C" Grade.**—Arthur Bailey (18) on a count back from Dud. Williams, 23 points.



**Special Individual Interstate Trophy.**—Alex Hallett (6), 31 points.

**Championship:**

Laurie Skinner, 38 points.

B. Daly, 30 points.

George Fawaz, 28 points.

**Wednesday, May 4—Avondale**

**Four Ball**

Winners: Jack Madigan (18) and Arch Edmondson (11), 37 points.

Runners-up: Les Walley (9) and Bert Asprey (13), 37 points.

"A" Grade.—G. Fawaz (3), 29 points.

"B" Grade.—G. Collins (12), 31 points.

"C" Grade.—Fred Needham (24), 26 points.

**Special Interstate Trophy.**—Abe. Chater (12), 27 points

**Thursday, May 5—Elanora**

**Four Ball:**

Winners: Arch. Edmondson (8) and Alan Cawood (18), 37 points.

Runners-up: David Campbell (20) and Os. Williams (13), 37 points.

"A" Grade.—Alex. Hallett (4), 31 points.

"B" Grade.—Alan Weir (11), 28 points.

"C" Grade.—Lindsay Smith (27), 28 points.

**Best Interstate Card.**—Wally Gear (8), 30 points.

Our correspondent has also forwarded the results of the N.S.W. Chemists' Golf Club day that was held at Bonnie Doon on June 2. The results were:—

**Four Ball:**

Winners: H. Watson (6) and Hymie Eizenberg (8), 46 points.

Runners-up: Frank Davidson (18) and John Ingham (24), 44 points.

"A" Grade.—Tom Hollingsworth (9), 33 points.

"B" Grade.—Brian Gilhorne (18), 37 points.

"C" Grade.—Stan. Palfreyman (20), 35 points.

With only two rounds to be played, the annual trophies presented for the best aggregate score of six cards have now reached a very interesting stage.

The F. P. J. Gray Memorial Trophy could quite easily result in a photo finish. Laurie Wood heads the list in this, and also the "B" and "C" Grade Special Trophy. Leading scores to date are:—

**F. P. J. Gray Memorial Trophy**

Laurie Wood, 117 points.

Cliff Gostelow, 117 points.

Warwick Rourke, 113 points.

Bill Timony, 112 points.

John Plunkett, 111 points.

Tom Hollingsworth, 110 points.

**"B" and "C" Grade Special Trophy**

Laurie Wood, 117 points.

Frank Davidson, 104 points.

John Storman, 104 points.

Len Harrington, 101 points.

**FIRST YEAR APPRENTICES' LECTURES, 1955**

The 1955 series of First Year Apprentices' Lectures were inaugurated at a ceremony held at "Science House," on May 26, at 9.30 a.m. Although the city experienced a deluge overnight and rain fell heavily all the morning, the hall was packed to capacity, with 25 apprentices standing.

Opening proceedings, the President of the Pharmaceutical Society of New South Wales, Mr. B. G. Fegent, said: "Ladies and gentlemen, it is my pleasure to welcome you to our First Year Lectures. I am sorry that so many are inconvenienced by the absence of seating accommodation. Nearly 200 apprentices have enrolled and commencing next Thursday we have arranged for the lectures to be held in the Stawell Hall of the Royal Australasian College of Physicians. The numbers enrolled this year are greatly in excess of expectations.

"I welcome also the leaders of pharmacy in their respective organisations, Mr. Leslie Smith, President of the State Branch Committee of the Guild; Mr. P. E.

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## NEW SOUTH WALES—Continued

Cosgrave, representing Mr. J. L. Townley, President of the Pharmacy Board; Mr. Neil Steffenson, President of the S.U.P.A., and also Mr. C. G. Gostelow, one of our lecturers, who will commence the lecture series. Our other lecturer, Mr. Hall, is not present this morning, and tenders his apologies, and last, but by no means least, Mr. A. E. Conolly, our Secretary. Each will speak later, and tell you of their respective organisations."

Addressing the apprentices assembled, Mr. Fegent said: "You have taken the first steps towards qualification as a pharmacist, to become a member of an honourable profession. The pharmacist is a man of integrity, and he has always been held in high esteem. During the war and subsequently, the real status of the pharmacist was recognised, his place in the comity of those in the health professions was never higher. Pharmacy is not the handmaiden of medicine."

"In these lectures you will gain your first experience, you will start off on a uniform basis which will assist your Masters to observe a uniformity of training. Pharmacy is not an easy profession; for example, there are many laws to observe, all are essential, but in some instances they appear contradictory. Official pharmacy is working to correct anomalies."

"What I would like to stress most is the spirit of service with which you must become imbued. Service to the community must be our watchword, but service should not be confused with servility. In pharmacy a smile is as good as a cure, a smile inspires confidence in you. Never invade the province of the doctor. Realise your limitation in the giving of advice. Comport yourself with dignity, uphold the high standards of those stalwarts of the past who have made our profession what it is today." (Applause.)

Mr. Fegent then called on Mr. Cosgrave to address the gathering.

Mr. Cosgrave said: "Speaking on behalf of the President of the Pharmacy Board, Mr. Townley, I will tell you briefly of the constitution and functions of the Pharmacy Board. It is composed of eight members, seven being registered pharmacists elected by the pharmaceutical chemists on the register."

"The Board administers the Pharmacy Act and the Poisons Act. It meets once a month. All your names have been before the Board, and for the next three years you will be directly under the control of the

Pharmacy Act. You may experience certain difficulties during your apprenticeship, but they can always be ironed out. You are at liberty to come and see me to discuss your problems."

"In 1946 the number of apprentices totalled 56, this year we have reached an all-time record of 350 new apprentices. Immense growth has taken place over the last decade. When you pass all your examinations you can become a registered pharmacist if you are not under 21 years of age. When registered, you can assume control of the pharmacy. Many travel overseas to broaden their experience. Pharmacy is a very interesting profession."

Do not look upon the Board as a bogey, it is there for your guidance. There are a lot of girls here today, so I say to the boys, look out for your laurels as the girls have a meritorious record in the passing of the pharmacy examinations." (Applause.)

Mr. Regent then asked Mr. Smith to speak.

Mr. Smith said: "Ladies and gentlemen, as a matter of interest, you should be informed on the constitution and the objects of the Guild in general. It was formed 27 years ago. One of its objects is to protect and further the interests of the Master Pharmacist in business on his own account. It certainly does this in a most assiduous manner."

"Another obligation under the Arbitration Acts is to deal with conditions of employment. The Guild always seems to be doing battle with someone or other. Long experience has shown me that the day tranquility reins the Guild will be going backwards. The Guild has a membership of 97.3 per cent. throughout the Commonwealth."

"Before an informed manufacturer should think of launching a line, he should discuss it with the Guild. The price structure must be investigated and it must be acceptable or we will have nothing to do with it."

"There is only one way to work, and that is to work continuously. That undignified sprint at the end confuses you and you are like the Tower of Babel—confusion confounded. Begin by studious application to your work, if there was an easy way to pass examinations it would have been discovered and blazoned out. If you work you will reap your reward." (Applause.)

Mr. Fegent then called on Mr. Steffenson.

Mr. Steffenson said: "Thank you, Mr. Fegent, for your kind invitation to come here this morning. It is a privilege and pleasure to represent the University,

### FIRST YEAR APPRENTICES' LECTURES, 1955.



L. to R.: Mr. Neil Steffenson, President, S.U.P.A., addressing the students; Mr. B. G. Fegent, President, Society, opening proceedings; Mr. L. W. Smith, State President, F.P.S. Guild, giving some details of the Guild. Section of students.



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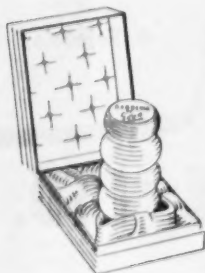
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"The atmosphere at the University is very different from the schoolroom. There is a lot more in University life than study. The S.U.P.A. organises various social functions, visits to factories, etc. This year we are publishing extra copies of the 'Mortar Monthly' for apprentices. This month's 'Mortar Monthly' would be available at the door. The Pharmacy Ball will be held on July 1, tickets 17/6 each. (Laughter.)

"Next January the N.U.P.S.A. Congress will be held in Sydney. I would like you to come along to the Congress, if your Masters give you your holidays in the first week in January.

"Good luck in your next three years' study." (Applause.)

Mr. Fegent then called on Mr. Gostelow.

"Fellow students," said Mr. Gostelow, "I feel I can call you that. I have not much to say, but would like to stress that the first three lectures are most important (Weights and Measures). Calculations are most important because many failures are due to inability at the examination to handle the calculations necessary in pharmacy."

Dealing with "vital statistics," Mr. Gostelow said: "Three hundred apprentices will go up and do first year, 150 will enter Mat. Med., 75 will pass at the end of the year. Of that 75, 40 will get through the final. I hope there will be a better class this year and 50 will get through," added Mr. Gostelow. "To be good students, you should study all the time."

Mr. Fegent referred briefly to Society affairs and benefits of joining the Society as Associates.

Mr. Conolly then spoke briefly, and the function concluded.

## PHARMACEUTICAL SOCIETY

### Council Meeting

The Council of the Pharmaceutical Society of New South Wales met at Science House, 157 Gloucester street, Sydney, on June 7.

**Present.**—Messrs. B. G. Fegent (Chairman), E. G. Hall, K. A. Cartwright, H. W. Read, S. E. Wright, J. F. Plunkett, K. H. Powell, W. R. Cutler, A. W. West, A. F. Winterton, G. G. Benjamin and J. L. Townley.

**The Rt. Hon. the Lord Mayor—Official Visit.**—Mr. Fegent said that in company with the Secretary he had paid his respects to the Rt. Honourable the Lord Mayor on May 24.

**Honour Board.**—It was decided to accept the quotation of Armstrong Bros.

**Meetings of Legislative Committee Held on May 17 and 31.**

**Proposed Alterations to Articles of Association.**—Concerning Article 13 and subscription payable to the Society, the Secretary read a letter from Mr. T. G. Allen, Secretary of The Australasian Pharmaceutical Publishing Co. Ltd., setting out clearly the qualifications of persons entitled to be present and vote at meetings of the company.

Discussion then took place concerning the recommendation of the Legislative Committee that a plebiscite of members should be held to ascertain their opinions as to whether the annual subscription should be increased or the cost of the "A.J.P." be payable as a separate charge.

It was moved and seconded that Council adopt the recommendation that a plebiscite be held.

On being put to the meeting the motion was declared lost.

In respect of the subscription payable to the Society, it was finally resolved that steps be taken to amend Article 13 by special resolution, by deleting the subscription at £2/2/- and substituting the amount of £3/3/-.

Mr. Hall abstained from voting on this motion.

**Science Group: Three-monthly Lecture.**—Mr. Fegent said he had contacted Dr. Adrian Johnson, who had consented to deliver a lecture entitled "What the Dermatologist Wants from the Pharmacist." Accordingly the Stawell Hall had been booked for July 26.

It was decided to admit to the lecture any person associated with pharmacy. Attendance not to be limited to Society members only.

**Post-graduate Lectures, 1955.**—Mr. Winterton said that country members were debarred from attending the lectures in person. He inquired if notes could be sent out to country members.

It was decided to inquire through the "A.J.P." the number of country members who required notes of the lectures at present being delivered by Mr. Wright and also the lectures delivered in the previous year by Professor Thorp and Associates. Lectures to be available upon the payment of the fee of £1/1/- to full members of the Society only.

It was decided that one copy only per person could be provided of the current lectures. Persons who were not present each lecture night could apply to the office for their copy.

It was decided to bind suitably copies of Mr. Wright's lectures.

**First Year Apprentices' Lectures, 1955.**—It was reported that the lectures had been transferred to the Stawell Hall, due to the fact that the attendance was about 200 apprentices.

**Examination.**—It was decided to reserve the Great Hall at the University for the holding of the examination, one week after the conclusion of the last lecture.

**Annual Dinner, 1955.**—It was decided to utilise a radiogram to provide the background music, Mr. Benjamin to be in charge.

**Pharmacy Ball.**—The Secretary read a letter from the Trocadero. It was decided to pay the deposit of £20 and to fix the price of tickets at £1/1/.

**Zone Meeting at Lismore.** Mr. Fegent said the zone meeting would be held on July 17. Mr. Jewkes and Mr. Kelleher would be present; also Mr. Smith and Mr. Conolly.

It was resolved that Mr. Fegent should represent the Society at the zone meeting.

**A.N.Z.A.A.S. Meeting, Melbourne, August 17-24.**—Mr. Wright said that the position of people giving papers was not yet quite settled. A decision should be made at next meeting as to who should receive the Society's subsidies.

Mr. Cutler said he had lunched with Mr. Manning, the previous Kodak Scholar, who would like to deliver a paper at Section "O."

**Standards of Professional Conduct.**—Mr. Cartwright suggested that discussion be deferred to a special meeting of Council.

Mr. Hall: "A special Council meeting to discuss the draft and also consideration of remarks made at the Annual General Meeting."

Mr. Powell: "Take criticisms into account."

It was suggested that a small paragraph should be placed in the Guild Service Bulletin, calling for suggestions. Agreed.

Mr. Benjamin inquired if the special Council meeting would be an open meeting.

The answer was no.

It was resolved to decide at the ordinary meeting held in July when the special Council meeting should take place.

With reference to a special general meeting of members of the Pharmaceutical Society, it was resolved to book a hall for the holding of the special general meeting during the last week in September next.

**Applications for Membership** were approved as follows:—

**Full Members.**—(Mrs.) Kathleen Adele Mitchell, Thomas Bruce McRae, Myra Margaret Roberts, Reginald Dominic Ryan, Stanley Drake, Helen Walker Grace.

## NEW SOUTH WALES—Continued

**Associate Members.**—Kathleen Mary Armstrong, Howard John Blair, Richard Athol Flanagan, Brian Harold Fogerty, Trevor Darrell Stewart Green, Maxwell Robert Miller, Desmond James Mounsey, Ronald William Oates, Roman Potocki, Brian Dennis Turnbull, John Charles Whittaker, Peter Frederick George Towner.

**Correspondence.**—A.N.Z.A.A.S., acknowledging name of delegate (Mr. Brian G. Fegent). Agenda paper will be sent to delegates just prior to the meeting.

The Pharmaceutical Society of Great Britain, inquiring whether the flood appeal fund is still open, and whether a contribution from the Society would be helpful.—It was decided to reply, appreciating the offer, but stating that the fund is now closed.

Mrs. Jean M. Manning, Hon. Secretary to the A.P.F. Committee, enclosing first batch of galley proofs of 1955 edition of A.P.F. for emendation.—Mr. Read said that consultation between members of the Editorial Committee could be done per telephone.

P.A.A., re order for A.P.F., 1955. The Secretary said that 2000 copies of the new A.P.F. had been ordered.—It was resolved to ratify this order.

Inquiry was made as to whether the new A.P.F. would be recognised by the B.M.A.

N.U.P.S.A., 15 Wolseley street, Clayfield, Brisbane, re proposed combined Science/Pharmacy Commonwealth Scholarships. Advising executive of the National Union is grateful to the Council for its support in the matter.

Mr. W. J. Gass, Parramatta, intimating that the advertising agents for the Telephone Directory have been instructed to remove the advertisement as Skin Specialist from the Directory altogether.

Mr. J. R. Winning, Nimbin, seeking assistance in placing a female apprentice in Sydney next year.—It was decided to place the name of the apprentice on the D.H.A. list.

Pharmaceutical Society of Tasmania, advising that Mr. Terance Peter Tighe, who is transferring to New South Wales in the near future, will be applying for membership of the Society.

Director of Tutorial Classes, the University of Sydney, inquiring if there is any way in which the Department's "Current Affairs Bulletin" can be brought under the notice of Society members with a view to expanding circulation of the publication.—It was decided to refer this matter to the Journal for publicity.

The meeting terminated at 11 p.m.

### THE GUILD

### S.B.C. Meeting

The State Branch Committee of the New South Wales Branch of the Guild met at Science House, 157 Gloucester street, Sydney, on May 12, at 8 p.m.

**Present.**—Messrs. L. W. Smith (Chairman), R. W. Feller, J. N. Young, W. G. Sapsford, C. D. Bradford, R. Frew, P. Lipman, and W. F. Pinerua.

**Talk on Pharmacy Modernisation.**—Mr. Smith said that most members of the State Branch Committee had attended the function held at Stearns' Theatre on April 20. The talk was most instructive. He thanked Frederick Stearns & Co. for the trouble and expense incurred and for the thoroughness with which they had gone about preparation of the address, illustrated with Kodachrome slides, showing some of the most modern Australian pharmacies. They had done an excellent job.

Mr. Smith said he had offered to go to the various centres where talks were to be given. He would visit

Newcastle on May 18. Talks would also be delivered at Orange, Albury, etc.

Mr. Lipman said that most chemists did not think of modernisation in the way illustrated during the talks. When the chemist saw the slides he realised what could be done. The majority must take advantage of it. "I can see very great things coming out of it."

Mr. Feller said he was in agreement with the sentiments expressed. The organisation which displayed goods prompted impulse buying and got the most out of it. It was a fact that if people could see the goods the takings would increase tremendously.

Mr. Feller said he thought that pharmacies should be the outstanding retail stores in the district. Frederick Stearns & Co. should be applauded. Guild members must travel with the times, and the opportunity must be given them to think about pharmacy modernisation.

The State Branch Committee supported Mr. Smith's proposal to attend the various talks on pharmacy modernisation.

**Kodak Dinner—Usher's Hotel.**—Mr. Smith said the dinner was very successful.

**Trade Dinner.**—Mr. Feller suggested that the Guild should arrange to hold a Trade Dinner, say, in August next.

It was decided to hold such a dinner in the Blue Room at Usher's Hotel. The exact date to be fixed by the executive.

**Guild Flood Devastation Appeal—Distribution.**—The Secretary read a number of letters received from beneficiaries, who were most grateful for the assistance rendered them by their fellow-pharmacists. It was decided to publish the letters without names.

The Secretary read a letter from the Queensland Branch of the Guild, advising that no Guild members in Queensland required assistance from the flood fund.

**Federal Delegate's Report.**—Reference was made to the Federal President's letter of 28/4/55.

Concerning the proposed amendment of the National Health Act, a long discussion took place concerning the manner in which Section 99 should be amended so as to make it more in keeping with Section 32, which covered agreement with the British Medical Association. It was finally decided to discuss the subject further at next meeting.

**New Members Elected.**—Norman Edward Gledhill and Allan Edward Olsen.

**Reinstatement.**—J. D. Nicholson.

**Reports of Sub-committees** were dealt with as follows:—

(a) **Trade and Commerce, Planning and Publicity.**—Report of meeting held on April 28, as circulated.

No discussion took place concerning the report, which was received and the recommendations contained therein adopted.

Mr. Feller said that Glucojels in cellophane were a tremendous success. Mr. Cain, of the Cains Confectionery Co., would distribute 1500 wire baskets, which would hold Glucojels and Medi-Candy.

**Lantigen Promotion—Interview with Messrs. Sack and Noble.**—Mr. Feller said the Lantigen campaign would go on. The matter of a deal had been put to Mr. Sack, and he had withdrawn to consider this proposal.

**Sharpe & Dohme—Labels.**—Mr. Frew said that the labels on the bottles containing Sharpe & Dohme products were most difficult to remove.—It was decided to write to Sharpe & Dohme, asking them to affix their labels with a water soluble adhesive.

**Potter & Moore's "Lily of the Valley" Series.**—It was decided to inquire from Mr. Coad why the "Lily of the Valley" series had not been included in the Retail Price List.

**(b) Pricing Sub-committee.**

**Complete List of Parcel Buys.**—It was reported that Mr. Coad was investigating the production of the list.

**(c) Repatriation, Lodge and Hospital Dispensing Sub-committee.**

**Dispensing of P.B.'s in Public Hospitals.**—Mr. Smith said that a letter had been written to Mr. Love, of the Hospitals Commission, seeking an interview.

In reply to Mr. Smith, Mr. Sapsford said he would attend the interview when it was arranged.

**(d) Industrial and Early Closing.**

**Application for New Chemists (State) Award—Hearing by Pharmacists' (State) Conciliation Committee, May 5.**

Mr. Smith said that Mr. O'Dea's application for an interim variation in respect of wages had been refused. After May 17, the Conciliation Committee would advise when the matter would again come before the Committee.

**Annual General Meeting, "Science House," August 31, 1955.**—The Secretary said that nominations would close on July 11.

**Poisons Advisory Committee.**—Mr. Smith said that at next meeting the matter of a representative would need to be discussed.

**Printing of Cards—Late Opening Fees.**—Mr. Smith said he would hand in copy for printing.

## NEW DISPENSING TARIFF FOR SOUTH AFRICA

The South African Pharmaceutical Journal for May, 1955, asks the question: "How many chemists today still connect the comprehensive chart they consult almost hourly to price the prescriptions they dispense with a simple card issued in 1941 by the association Pharmaceutical Societies?" This introduction to the comments on the construction of the standard dispensing tariff of 1954 leads to the claim that the South African dispensing tariff is probably the most equitable system devised for the public as a basis of calculating professional fees in any part of the health services. The rub is, however, that the scheme has not been as equitable where the chemist himself is concerned.

The last adjustment to the dispensing tariff in South Africa was in 1951. This represented an increase of less than 5 per cent. Today's adjustment is averaged at round about 12½ per cent. Dispensing fees rise from 9d. to 1/3 for an average five minutes' professional labour. This falls far short of the 20/- per hour at which that factor has been incorporated in the revised tariff. In fact, it returns the dispenser only 15/- per hour.

## PHARMACY HEADQUARTERS IN JOHANNESBURG

The foundation stone of the new headquarters of the Pharmaceutical Society of South Africa was laid recently during the first session of the 10th Annual Conference in Johannesburg by Dr. W. Nicol. In South Africa, as in so many other countries, the value of having one's own premises to serve as headquarters has long been realised. Commenting on the official ceremony, the South African Pharmaceutical Journal states that the question now is whether the building will be completed to seven floors at this stage, saving several thousands of pounds, or will stop at the interim floor level plan and be completed at a later date.

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# VICTORIA

## PERSONAL and GENERAL

State  
News

Members in Victoria desiring publication of personal items of interest are invited to write or telephone details to the Editor (FJ5161).

Mr. R. M. Edwards will be opening a pharmacy at Menzies avenue, North Dandenong, about July 11.

Mr. C. H. Gaunson has appointed Mr. A. G. Westlake as manager of his Prahran pharmacy.

Mr. J. W. Miller has opened a pharmacy at Grant street, Alexandra.

Mr. P. D. Carrick has returned to Victoria from N.S.W., and will be managing Craven's pharmacy, Albert Park, during Mr. L. H. Walker's absence abroad.

Mr. J. Weir has been appointed manager of Mr. and Mrs. G. F. Hayes' pharmacy, Burgundy street, Heidelberg.

Miss C. Younes has returned from Queensland, and has been relieving at Mr. N. D. Myers' Highland Court pharmacy, Thornbury.

Mr. J. G. Manning has returned from overseas, and has been appointed manager of Mr. H. A. Braithwaite's pharmacy, Camberwell.

During Mr. S. G. Robson's absence on holiday Mr. I. McNamara will be in charge of his pharmacy at Hamilton.

Mrs. E. Rabinov (formerly Miss Elinor Nanscawen) will be opening a pharmacy at 326 South road, Moorabbin, about mid-July.

We are pleased to report that Mr. R. H. Borowski, Pharmaceutical Representative, I.C.I.A. & N.Z., has recovered from his recent illness.

New pharmacies have been opened at the addresses indicated:—Mr. G. K. Gunner at Railway parade sth., Glen Waverley; Mr. J. W. Miller at Grant street, Alexandra; Mr. B. F. Huntsman at 939 Station street, Box Hill.

Mr. S. G. Hale and Miss Dorothy Pratt have purchased from Mrs. L. V. Peacock, and will carry on in partnership the pharmacy at 20 Holmes road, Moonee Ponds. They will continue to use the trading name of "Marrison's Pharmacy."

**Forthcoming Marriage.**—The marriage will be celebrated on July 23, at St. Andrew's Kirk, Ballarat, of Patricia Helen Ashley and James William John. Mr. and Mrs. John will leave on July 30, on the Strathmore, for two years overseas.

**Marriage.**—Mr. A. W. Williamson is being married on August 13 to Miss Wendy Goodwin, of Essendon. They intend leaving on the "Oceania" for England on August 17, and expect to spend about 18 months abroad.

**Birth.**—Congratulations to Mr. and Mrs. R. D. Tyn-dall, of Kangaroo Flat, who welcomed the arrival of their third son, Christopher Richard, on May 28.

## OBITUARY

We regret to announce the death of Mr. Robert Aubrey Jones, of 14 Main street, Blackburn, which occurred on April 28, 1935. Mr. Jones qualified in 1904, and prior to his retirement some years ago was in practice at Blackburn.

## BUSINESS CHANGES

Mr. F. R. Ryall has purchased the pharmacy of Mr. J. S. Thomas at Ashwood; Mr. A. J. Ford, Mr. R. C. Brennan at Fitzroy; and Mr. V. R. H. Weymouth, Mr. A. M. Montague at Sale.

Mr. C. A. Paull has advised that he has closed his pharmacy at 45A Karnak road, East Darling.

Mr. G. W. Siebler has moved from 231 to 237 Johnston street, Abbotsford.

## MANAGERS AND RELIEVERS: JUNE LIST

Reliever	Pharmacy
Anderson, F. . . . .	H. C. Heenan, Edenhope.
Miss H. J. Aitken . . . . .	U.F.S. Dispensary, Preston.
Barker, S. M. . . . .	H. A. Synman, Melbourne.
Baker, J. . . . .	Fairfield Hospital, Fairfield.
Barton, Mrs. E. M. . . . .	U.F.S. Dispensary, Canterbury.
	U.F.S. Dispensary, Surrey Hills.
Benporath, L. . . . .	U.F.S. Dispensary, Preston.
	A. & N. Rotman, St. Kilda.
Cunningham, A. F. . . . .	A. H. Mansell, Glenferrie.
Doyle, Miss M. F. . . . .	J. J. Lonergan, Footscray.
Eccleston, Mrs. L. . . . .	C. H. M. Bennett, Balacalava.
Evans, Miss E. . . . .	J. T. De Ravin, Toorak.
Everett, C. D. . . . .	W. C. Gribbin, Mentone.
	J. B. Gough, Gardenvale.
Garlick, Miss L. A. . . . .	U.F.S. Dispensary, E. B'wick.
Gunner, G. K. . . . .	A. H. Mansell, Glenferrie.
	R. Clarke, Blackburn.
Hale, S. G. . . . .	T. F. Clark, Balwyn.
	T. A. Linton, Dunolly.
Hart, L. E. . . . .	D. G. Mitchell, Chelsea.
Hibberd, A. R. . . . .	U.F.S. Dispensary, Coburg.
Huntsman, B. F. . . . .	H. J. O'Halloran, N. Fitzroy.
	D. R. Currie, Glenroy.
Hookey, H. . . . .	J. S. McNamara, Frankston.
Hornby, B. C. . . . .	Bloore's Pharmacy, Warr'bool.
	R. J. Wilkin, Melbourne.
Lane, W. K. . . . .	P. J. Dickason, E. Bentleigh.
Lang, I. D. . . . .	L. Rowbottom, Newport.
	W. Jackson, Geelong.
Leaman, J. . . . .	J. R. Cunningham, Melbourne.
	A. Aronson, Footscray.
Malcolm, H. . . . .	F. J. Prowse, Mirboo North.
Matson, R. G. . . . .	K. N. Roberts, E. Brunswick.
McPherson, Miss H. . . . .	A. M. Cunningham, Colac.
O'Callaghan . . . . .	G. E. Gray, Swan Hill.
O'Donnell, B. D. . . . .	R. T. Benton, Alphington.
	A. H. Mansell, Glenferrie.
Pedrazzi, Miss N. R. . . . .	A. V. E. Coates, Melbourne.
Pout, Mrs. H. D. . . . .	U.F.S. Dispensary, Sand'ham.
Praetz, Miss P. E. . . . .	E. W. Braithwaite, Glenferrie.
Rewell, J. B. . . . .	G. F. Troup, Ascot Vale.
	R. N. W. Titcher, Dandenong.
Roberts, J. . . . .	A. Rotman, E. Malvern.
Rundle, A. B. . . . .	E. J. Wilson, Wangaratta.
	T. G. Sullivan, Euroa.
Spence, Miss N. . . . .	J. J. Davey, Windsor.
Turnour, Miss G. M. . . . .	A. V. E. Coates, Melbourne.
Vall, H. H. . . . .	E. McDougall, Carrum.
Weir, J. W. . . . .	G. E. Gray, Swan Hill.
	Repatriation Hosp., Heidelberg.
	J. E. Coates, Thornbury.
Westlake, A. G. . . . .	J. K. Gosstray, Elsternwick.
Zacharin, Miss B. . . . .	H. A. Synman, Melbourne.

## CHEMISTS LEAVE FOR OVERSEAS

The following Victorians have left or have indicated their intention of leaving for extended overseas trips:—Miss Iris Thompson ("Orsova," March 14), Miss Beth Baker ("Orsova," March 14), Miss Shirley Bowman (Strathaird, June 4), Mr. Ian C. Wood (July).



## VICTORIA—Continued

### PHARMACY IN DEGRAVES STREET SUBWAY

Mr. Phillip Jacques Tissot, who conducts a pharmacy at Caulfield, was the successful tenderer for premises to be used as a chemist's shop in the Degraives street subway leading to Flinders street railway station.

It was reported in the press that the premium offered (in addition to rent) was £5005.

### APPRECIATION OF PHARMACEUTICAL SOCIETY'S WORK

The Council of the Pharmaceutical Society takes pleasure in reporting the gift of £100 during the month to the Victorian College of Pharmacy War Memorial Building Fund, the gift having been made by a member as an expression of appreciation of the Society's work.

In a letter to the President the member said:—

"One of my former apprentices received his Final Certificate at the recent function, and I am pleased to forward the enclosed cheque for the privilege and pleasure I have had in assisting with his training, and in appreciation of the work carried out by the Society."

### WAGES AWARD RATES

Operative from the First Pay Period in May, 1955

Apprentices		Juvenile Workers (Female)	
1st year	50/6	16 years	46/6
2nd year	67/-	17 years	73/6
3rd year	91/-	18 years	81/-
4th year	112/6	19 years	98/6
5th year	165/6	20 years	113/-

### Other Employees

	Male	Female
Manager	£18 15 0	£15 15 6
Chief Pharmacist	17 8 6	14 9 0
Reg. Pharmaceutical Chemist	16 2 6	13 3 0
Unregistered Assistant	13 15 0	10 15 6
Shop Assistant (over 21)	—	9 13 0

White Coat Allowance—Male or Female, 4/-.

### RESULTS OF MAY FINAL EXAMINATION

Passes.—J. F. Baird, Miss J. P. Broderick, R. S. Cope, J. A. Daniel, J. D. Duffus, M. Gandolfo, V. Gandolfo, M. George, M. Gor, I. R. Hanger, Miss M. P. Hayes, J. Kalaf, Miss M. J. McAlpin, Miss E. J. McDonald, Miss M. J. Paterson, Miss E. A. Phelan, Miss J. Read, M. J. Stokes, D. G. Stokie.

**Partial Passes.**—The following candidates are eligible to sit for the subjects indicated at a subsequent examination:—

Section I: Candidates Nos. 32, 34. Sections I, II, IV: Candidate No. 2. Sections I, IV, V: Candidate No. 1. Sections I, IV: Candidates Nos. 9, 56. Sections I, IV, VI: Candidates Nos. 37, 39. Sections I, VI: Candidate No. 20. Section II, V: Candidates Nos. 27, 60. Sections II, IV, VI: Candidates Nos. 3, 14. Section IV: Candidates Nos. 17, 18, 25, 33, 42, 43, 45, 57. Sections IV, V: Candidate No. 8. Sections IV, VI: Candidates Nos. 23, 46, 49, 50, 58, 61, 35. Section VI: Candidates Nos. 31, 44, 47.

### QUARTERLY MEETINGS—PHARMACEUTICAL SOCIETY OF VICTORIA

The Council of the Pharmaceutical Society has decided to revive the practice of holding quarterly meetings of members, addresses by prominent citizens on subjects of current popular interest having proved very popular when organised previously.

The first of these quarterly meetings will be held in the large lecture theatre, College of Pharmacy, Melbourne, on **Wednesday evening, July 13, at 8 p.m.**, when the guest speaker will be Dr. R. S. Andrews, Chairman and Managing Director of the Gas and Fuel

Corporation. The subject of Dr. Andrews' address will be "Future Brown Coal Development in Victoria." Refreshments will be served at the conclusion of the meeting.

The Discussion Group meeting, which is usually held on the second Wednesday of the month, will be combined with the Quarterly Meeting on this occasion.

All members, together with their assistants and apprentices, are invited.

### AGREEMENT FOR NEW COLLEGE SIGNED

The agreement between the Victorian Pharmaceutical Society and the Government for the advance of £300,000 for the erection of a new College of Pharmacy



Signing agreement with Government.

in Parkville was signed at a special meeting of the Council of the Society held on June 10.

The President, Mr. Ivan J. Thompson, who has been indisposed for some time, made a special visit to the College for this meeting, and was able to take part in the formalities associated with the signing of the documents.

In the picture above, two former Presidents—Messrs. Leonard Long (1948-1951) and A. G. Davis (1951-1953)—look on while the President (Mr. Ivan J. Thompson) is about to sign the agreement.

### PHARMACY SUNDAY: CHURCH SERVICES

Special services for members of the pharmaceutical profession were held in St. Paul's Cathedral and St. Francis' Church, Melbourne, on Sunday, May 22.

Approximately 300 members of the Pharmaceutical Society accompanied by members of their families and friends, attended the service at St. Paul's Cathedral, where the sermon was delivered by Dean Barton Babage. The Scripture lessons were read by Mr. E. W. Braithwaite, Chairman of Directors of Pharmaceutical



#### AND OTHER FUNGOUS INFECTIONS OF THE SKIN

In the summer months when tinea and other fungous infections become most active the demand for a dependable preparation for their treatment increases in proportion. Undex, which has proven its effectiveness in the prophylactic and therapeutic treatment of these infections, becomes more than ever a necessity to every pharmacist's stock.

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## VICTORIA—Continued

Defence Ltd., and Mr. Leslie B. Allen, President of the Victorian Chemists' Sub-branch of the R.S.L.

In the course of his sermon, Dean Babbage, speaking to the pharmaceutical section of the congregation, said: "You seek as members of a highly qualified and honourable profession to fulfil a vocation of useful service and to minister God's gift of health."

At St. Francis' Church, Lonsdale street, Melbourne, a large number of Catholic pharmacists and their families observed Pharmacy Sunday on the same day, with attendance at 8 a.m. Mass. The President of the Catholic Pharmacists' Guild, Mr. D. Crowley, and the Honorary Treasurer, Mr. J. Coghlan, served the Mass. In the absence of the Guild Chaplain, the Rev. Fr. D. O'Connor, S. J., who was unable to officiate because of injuries received in a motor accident a few days previously, the occasional sermon was preached by Monsignor J. Hannan, of South Yarra.

### VICTORIAN CHEMIST GOLFERS' CLUB

#### Metropolitan Meeting

We had a wonderful outing, thanks to the hospitality of the committee of Metropolitan Golf Club in granting us their links, good golfing weather, and a record entry for our meeting on June 16.

The competition was Stableford, 18 holes, in three divisions of handicaps.

"A" section (scratch to 14) produced some fine scores, and the decision on a count back went to Frank Montegano from Monty Ross, with 38 points each, Ross returning a gross 77.

"B" division (15 to 23) also returned some fine scores. This was won by Bob Fletcher with 35 points.

"C" division (23 onwards) was won by Larry Fripp with 29 points.

In presenting the trophies, Ted Beacham (President) paid high tribute to the splendid condition of the course, which was really a picture. He congratulated the winners on their prowess, and thanked the executive and staff of Metropolitan club for their excellent service, which was greatly enjoyed by all.

Our next day is at Kingston Heath on Tuesday, July 19, which will end the season 1954-55.

Our charity day at Huntingdale in late March, although plagued by bad weather conditions and a lessened attendance, resulted in a net £247 being raised for the Girl Guide Extension Auxiliary for Spastic and Crippled Girl Guides. The thanks of the committee go to those firms and donors who so freely subscribed to our appeal.

On the "Orcares" going to Sydney at the end of April, a very pleasing dinner was held to celebrate the birthdays of two well-known chemists and committeemen, Messrs. Harry Henshall (Vice-President) and George Gorey. The team members going to the Interstate golfing carnival were the guests of these two. The President (Ted Beacham) in his usual breezy style paid a tribute to the efforts these members were making for the Victorian Chemists' Golfers' Club, and there was much revelry.—R.W.B.

### DISCUSSION GROUP

On May 18, at the College of Pharmacy, a Discussion Group meeting was held, with Mr. Geoff Treleaven, Ph.C., F.P.S., as guest speaker. His subject was "Newer Prescription Proprietarys." This type of meeting is always popular with pharmacists who wish to be brought up to date with the latest information on new products, and there was a large attendance.

The speaker dealt with groups of drugs, and also mentioned the regulations applicable to them. Among those mentioned were Procaine Amide HCl, which is used for certain heart conditions, and is available under the names of "Procardyl" and "Pronestyl."

The newer oral mercurial diuretics have the approved name of "Chlormerodrin," and proprietary pre-

parations available include "Mercloran" and "Oricur." The non-mercurial diuretic, "Acetazoleamide" or "Diamox," is a sulphonamide derivative and a full Specified Drug.

In the cortisone group the latest is fluorohydrocortisone, which is many times as potent as hydrocortisone, and is available as a topical ointment under the name of "Fludrocortone." As regards eye drops of cortisone, all are saline suspensions except "Scheroson Ophthalmicum," which is in oil.

Of the muscle relaxant drugs, mention was made of mephenesin carbamate, which is available commercially as "Tolseram," and is a full Specified Drug.

The Rauwolfia group of antihypertensive products can be divided into three groups, i.e., the standardised whole root, which is "Raudixin." Those containing total or selected alkaloids include "Serpina," "Serfia," "Rauwiloid," and "Rauwolfia." The group containing the reserpine alkaloid comprises "Serpasil," "Reserpin" and "Sertensin," etc. Apart from their antihypertensive action, these drugs are of value in anxiety tension states, etc. The Rauwolfia drugs are included in Part 1 of the Second Schedule or a prescription is required.

The anti-parkinsonism drugs include Caramiphen HCl ("Parpanit"), Diethazine HCl ("Diparcol"), Ethopropazine HCl ("Lysivane"), Benzhexol HCl ("Artane") and "Pipanol", Procyclidine HCl ("Kemadrin"), and Cyrimine HCl ("Pagitane"). All these are full Specified Drugs, and are also on the N.H.S. with the exception of "Pagitane."

Another important drug is Calcium Disodium Versenate, which is a chelating agent used for lead poisoning, etc.

The new barbiturate antagonist and antidote, i.e., Megimide with Daptazole, was mentioned, and also the important new morphine antagonist known as "Daptazole," and also as "D.H.A. 245." These drugs are Australian developments.

Of the latest antihistamines, "Marzine" was particularly useful for travel sickness. "Ambodryl" was a newer development of Benadryl. "Dibistin," although not available, was a combination of Antistine and Pyribenzamine.

Among other topics discussed were the newer antibiotics, anti-tussive drugs, anti-thyroid drugs, anti-epileptic drugs, anti-coagulants, new synthetic oestrogens, piperazine preparations, ionic exchange resins, chlorpromazine HCl ("Largactil"), and intravenous and intramuscular iron preparations, etc.

After the lecture an interesting discussion followed, and at the conclusion the Chairman, Mr. Geoff Leete, on behalf of those present, thanked Mr. Treleven for the wealth of information given the Group.

#### June Meeting of Discussion Group

On June 8, at the College of Pharmacy, the guest speaker for the Discussion Group evening was Mr. Bossence, whose subject was "Taxation Problems." As Mr. Bossence has been associated for a considerable time with the financial side of pharmacy, his remarks were of great interest to all those present at the meeting.

Mr. Bossence first spoke of the necessity for keeping correct records when conducting a retail business. This includes the proper books of account, and records such as Bank Statements, Cheque Butts, Statements issued by the Warehouses, and records of Cash Transactions.

The Cash Book must show the following information:—

- (i) What money goes into the bank.
- (ii) Where such money was obtained.
- (iii) Record of withdrawals.
- (iv) The Bank Book must coincide with the Cash Book.

The type of Cash Book recommended is known as the Columnar Dissection.

The Petty Cash Book is used to record transactions involving only small amounts of money.



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### VICTORIA—Continued

The necessity for keeping a Rough Day Book in the retail business was also discussed. The main purpose of this book is to record goods purchased.

For Customers' Accounts it is necessary to keep a Duplicate Docket and Receipt Book. Also a Card Ledger System was recommended, and finally Statement Forms for sending out the Accounts for payment.

The speaker also emphasised the necessity for keeping a strict watch on the amounts owing to Creditors, by filing the various Warehouse Statements and seeing that they are promptly paid at the end of each month.

At the end of 12 months' trading it is necessary to ascertain the following information:—

- (i) Stock at the beginning of the financial year and at the end of the period,
- (ii) Stock purchased, and
- (iii) Cash Takings.

After taking into account other receipts and expenditure, it is then possible to determine the amount of net profit earned by the retailer for the year; or, in less prosperous times, the extent of any loss incurred.

With regard to Fittings and Plant, if any renovations are made, it is necessary for Taxation Purposes to keep a record of the names of the people responsible for such work and the prices they charged.

After all this information has been listed, the next thing is the preparation of the Income Tax Return, which must show the Assessable Income, which is Income Received, Earned or Derived. Dividends, even when tax free, must be shown on the return.

Other useful hints on the preparation of an income tax return were given by the speaker.

Mr. John Oxley, President of the Discussion Group, thanked Mr. Bossence for his presence at the meeting, and said he was sure that the information Mr. Bossence had placed before the members would be a great help to them.

The evening was brought to a close with a round of applause for the guest speaker.—J.S.B.

### PHARMACY BOARD

*Monthly  
Meeting*

The Pharmacy Board of Victoria met at 360 Swanston Street, Melbourne, on June 8, at 10.15 a.m.

**Present.**—Mr. H. A. Braithwaite (President) in the Chair, Messrs. S. J. Baird, A. W. Callister, N. C. Manning, A. W. McGibbony, W. Wishart, F. C. Kent (Registrar), and T. G. Allen (Minutes Secretary).

Mr. G. Landers, winner of the second Kodak Traveling Scholarship, was in attendance by invitation.

**Correspondence.**—Formal correspondence was tabled, and the letters dealt with included the following:—

From a chemist, advising that he had informed the parent of his apprentice that the apprentice was not in his opinion suited to the vocation of pharmacy, and had recommended that the indenture be terminated. The Registrar reported that the parent and the apprentice had visited him, and had indicated their intention of proceeding with apprenticeship in another pharmacy.

From the Secretary, Department of Health, advising that various recommendations regarding amendment of the Schedules and Regulations under the Poisons Act had been gazetted.

From a country chemist, advising discrepancies in drug stocks and records. Advised as to procedure and informed that an inspector would call.

From the Pharmacy Board of N.S.W., forwarding copy of Annual Report for 1954.

From several overseas persons, inquiring as to requirements for registration. Mr. Callister reported on each of the applications, and the recommendations of the committee were in each case adopted.



From Houghton & Byrne Vic. P./L., requesting that requirements of Poisons Regulations relating to labelling of containers of chlordane preparations be modified. Resolved that such action be not taken at the present time.

From Inspector Hobley, Police Department, requesting the Board to arrange for a lecture on the Dangerous Drugs and Poisons Regulations to the Detective Training School on July 20. At the request of the Board, the President, Mr. H. A. Braithwaite, agreed to give the lecture.

To the Crown Crystal Glass Co. Pty. Ltd., inquiring if metric glass measures of conical shape complying with the specifications of the Weights and Measures Regulations would be available in October, 1955, when the temporary approval for use of cylindrical measures would expire.

From the Pharmaceutical Assistants and Dispensary Employees' Guild of Australia, seeking answers to a number of questions concerning duties and responsibilities of pharmaceutical chemists in relation to custody of drugs, etc. The Registrar was instructed with regard to the replies to be forwarded.

From the Society of Hospital Pharmacists, alleging that Dangerous Drugs were being supplied to hospitals on orders not signed by the pharmaceutical chemist in charge of the Pharmacy Department, as required by the Dangerous Drugs Regulations, and suggesting that the notice of the wholesale drug houses be drawn to the requirements. It was resolved that the wholesale houses be notified as suggested, and that a letter be sent to the Hospitals and Charities Commission, advising it of the action taken.

To the Collector of Customs, supporting an application from a wholesale house for issue of an import licence to cover mortars and pestles.

From the Victorian Pharmacy Students' Association, suggesting the Board consider varying the date of the Final Examination in November, 1956, to avoid clashes with the Olympic Games in Melbourne. The Board resolved that the matter be discussed with representatives of the Council of the Pharmaceutical Society.

From Fawns & McAllan, requesting that consideration be given to exempting from the requirements of the Dangerous Drugs Regulations the preparation "Ticarda." Arguments in support were submitted. The President said that this preparation was now classified as a Dangerous Drug by the Department of Trade and Customs, and the Board had been notified to that effect. A recommendation regarding the addition of the Dangerous Drugs which it contained, and of preparations of that drug, had already been submitted to the Department of Health by the Board, and could not be withdrawn. It was resolved that the matter be referred to the Poisons Schedules Advisory Panel for report.

**Formal Business.**—The following formal business was transacted:—

**Applications for Registration.**—Peter Reginald Monichon, Harry Shneider, Maurice Ramon Lee (Final Exam., Vic.), Kathleen Annice Jones (Cert. Ph. Bd., Gt. Britain), Mavis Charlotte Sherlock (Cert. Ph. Bd., N.S.W.).

**Erasures from Register.**—Robert Aubrey Jones (dec. 28/4/1955).

**Managers and Relievers Notified.**—59.

**Business Changes Notified.**—5.

**New Businesses Opened.**—3.

**Businesses Taken Over.**—2.

**Apprenticeship Indentures Registered.**—41.

**Apprenticeship Indentures Transferred.**—6.

**Apprenticeship Indentures Cancelled.**—1.

**Certificates of Exemption Issued.**—41.

**Certificates of Identity Issued.**—3.

**Opium Permits Issued.**—6.

**Apprenticeship Indentures Suspended.**—4.

**Application for Licence to Hospital to have Dangerous Drugs in Possession.**—1.

**Permits to Purchase Cyanide Issued.**—3.

**Interview with Representatives of Dental Associa-**

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## VICTORIA—Continued

**tion.**—Dr. L. F. Heine, a member of the Council, and Mr. John Newton, Secretary of the Australian Dental Association (Vic. Branch), attended the meeting at 11.30 a.m. by request, and submitted several matters for the Board's consideration. General discussion took place regarding their requirements of various regulations as they related to dentists. The position under recent amendments of the Regulations concerning the prescribing and dispensing of fluorides was explained. A request was submitted that consideration be given to making provision in the Regulations for dentists to prescribe antibiotics other than penicillin. The Board agreed to consider this matter, and that prior to dealing with it Mr. Callister should confer with Dr. T. Hurley.

Before retiring, Dr. Heine and Mr. Newton thanked the Board for receiving them and for its offer of co-operation.

**Final Examination Results.**—The Registrar reported that returns had not yet been received from the examiners. It was resolved that the President be authorised to release results for publication after they had been confirmed by the conference of examiners.

**Poisons Regulations.**—The Board resolved that it be recommended that dieldrin and similar substances be added to the Fourth Schedule to the Poisons Act 1928 under conditions similar to those applying to preparations of chlordane.

**Inspector's Reports.**—Reports of Inspector Ahern for the month were submitted. Among other matters, these dealt with inspection of pharmacies and other establishments in a country area; a report that quantities of brandy were being displayed in a pharmacy; a request to a drug house for supply of bulk quantities of Specified Drugs to a private hospital; a complaint regarding medicine supplied by a chemist on prescription; a Dangerous Drugs Register at a pharmacy in arrears; prescribing of substantial quantities of omnopon for which verification had been given by the prescriber. The reports were received.

**Prosecution of Super Market.**—The Registrar reported that proceedings against a super-market for breaches of the Poisons Regulations and Medical Act, Part III, were listed for June 10. Counsel had been engaged. The proprietors of the super-market were charged with illegally using the title "Pharmacy Department," and with the sale of a number of Second Schedule poisons.

**Apprenticeship Training and Curriculum.**—The President reported on discussions which had taken place between Mr. Callister, himself, and the Registrar during the month. Certain valuable suggestions regarding alternatives to apprenticeship as such had been submitted by Mr. Callister, and many other facets of the problem were considered. The Board agreed that the legal aspect of certain of the suggestions should be investigated and legal opinion obtained thereon.

**Financial.**—The Honorary Treasurer submitted the monthly financial statement, and accounts totalling £458/12/9 were passed for payment.

## PHARMACEUTICAL SOCIETY

*Council  
Meeting*

The Council of the Pharmaceutical Society of Victoria met at 360 Swanston street, Melbourne, on June 1, 1955, at 9.30 a.m.

**Present.**—Mr. E. Scott (Vice-President) in the Chair, Mrs. P. A. Crawford, Messrs. S. J. Baird, L. Hamon, F. W. Johnson, L. Long, V. G. Morison, G. H. Williams, A. G. Davis and F. C. Kent (Secretary).

**Continued Illness of President.**—The Vice-President reported that the President was not sufficiently recovered to attend the meeting, and was concerned that

he had been enforced by circumstances to miss so many of the meetings.

Members of the Council expressed regret at Mr. Thompson's inability to be with them, and resolved that a message conveying their sympathy and good wishes be sent to Mr. Thompson. They further resolved that a message be sent assuring Mr. Thompson of their loyal co-operation and suggesting that he allow sufficient time for recovery before resuming office actively.

Mr. Scott said he felt that such a message would greatly relieve their President's mind. Personally he was prepared to do everything within his power to assist the work of the Council during the President's indisposition.

**Welcome to Mr. J. G. Manning.**—Mr. J. G. Manning was present at the Council meeting by invitation, having recently returned from his overseas studies under the terms of the first Kodak Travelling Scholarship.

He was extended a warm welcome by the Vice-President and members of the Council, and speaking on behalf of the Council, Mr. Scott said they were delighted that Mr. Manning had returned. They were sure that he had gained much knowledge and experience during his 18 months abroad, and that this would be reflected in service to the profession, now that he was back.

In a brief response, Mr. Manning emphasised the remarkable hospitality and courtesy extended to him wherever he had travelled.

**Correspondence.**—Formal correspondence was tabled, and the letters dealt with included the following:—

From the Dean of the College advising that Mr. Warren Titcher had been appointed a full-time demonstrator. Appointment confirmed.

From the Dean of the College, advising that the Nicholas Bursary for the Fellowship Course, 1955, had been awarded to Mr. Clive W. Morris.

To Mrs. V. Aitchison, Mr. H. W. Hanton, Mrs. P. D. Belcher, and Mr. H. J. Deeble—letters of sympathy in recent bereavements.

From the Secretary of the Victorian Pharmacy Students' Association, expressing appreciation of the invitation to members of the S.R.C. to attend the Ceremony of Presentation of Diplomas. A letter was sent to the S.R.C., expressing thanks for assistance given by them at the function.

From representatives of the Society of Hospital Pharmacists, thanking the Council for the opportunity of being present at Professor F. H. Shaw's series of lectures in Pharmacology.

From Mr. E. F. Abfalter, tendering resignation. As Mr. Abfalter had been a member continuously for 25 years, and was now out of active practice, it was resolved that he be elected an Honorary Life Member and that the good wishes of the Council be conveyed to him.

**New Members Elected.**—The following new members were balloted for and elected:—

**Full Members.**—Nancy Fayle Kellas (new member) and Transfer from Apprentice Membership: Shirley Beatrice McAllister and John Barrett Rewell.

**Apprentice Member.**—Frederick John Mitchelson.

**Hon. Librarian's Report.**—On the recommendation of the Hon. Librarian, Mrs. Crawford, it was resolved that the following books be purchased for the Society's library:—Physical Chemistry, by L. H. Angus; Biochemistry in Relation to Medicine, by Carter and Thompson; Genetics for Medical Students, by Ford; The Structural Chemistry of Proteins, by H. D. Springhall; Inorganic Chemistry, by Fritz Ephraim; The Nitrogen Metabolism of Micro-organisms, by B. A. Fry; Charles Darwin, by Ruth Moore.

**A.P.F. Report.**—Mr. P. W. Johnson, Chairman of the A.P.F. Management Committee, reported that the first batch of proofs of the revised A.P.F. were on the press, and copies had been received from the Pharmaceutical Association. He had read through one set, and had returned these with minor corrections. He understood

(No. 2)

## VITAMIN E IN MEDICINE

**STONE S.** Evaluation of vitamin E therapy in psychiatric disorders. *Diseases Nervous System* 11, 355-61 (1950).

The 2800 cases treated with vitamin E included hospitalised psychotic patients and patients with epilepsy and office patients seen in the course of practice of neuropsychiatry. The dose of tocopherol given daily for long periods was 25 to 150 mg. The response to vitamin E treatment was almost invariably good. Patients became less easily fatigued, less irritable, had less indigestion, showed increased resistance to minor infections, and had a greatly improved sense of well-being. Discontinuation of treatment allowed a let-down and relapse in about 7 to 10 days. Associated side effects of interest were restoration of hair texture to normal, lesser incidence of greying of hair, and improvement of hypogenitalism.

Tocopherol administration was also of supplemental value in the treatment of menopausal tension and depressive states, involutional melancholia and manic depressive cases, schizophrenics, arteriosclerotic senile patients, psychomotor epileptics, patients with migraine headaches, patients with dysmenorrhoea, and alcoholics.

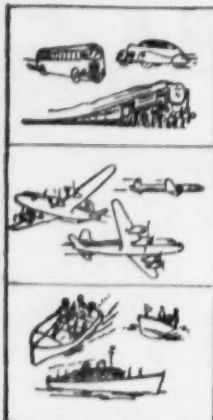
**BOYD A.M., RATCLIFFE A.H., JEPSON R.P., and JAMES G.W.H.** Intermittent claudication. A clinical study. *J. Bone and Joint Surg.* 31B, 325-55 (1949).

Obliterative arterial disease is classified into three groups: primary thrombosis of the popliteal artery, juvenile obliterative arteritis (Buerger's disease), and senile obliterative arteritis. Various methods of treatment are discussed, and the need is emphasised for evaluating results in terms of relative severity or clinical type of the disease. Type 1 represents the condition in which blood supply and muscular demand are very nearly equal; Type 2, in which this equilibrium is attained only above the threshold for pain reaction, and activity is stopped by persistence of pain; and Type 3 in which the equilibrium cannot be reached because of unbearable pain.

Tocopherol, 400 mg. daily, is the only substance that has given consistently good results in cases other than Type 1. Of 72 patients classified as Type 2, 27 were completely relieved and 32 were markedly improved. The consistency with which there was a lag period of four to six weeks before improvement was most striking. After a few months of treatment there was obvious improvement in the appearance of the feet of the patients.

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TABLETS

FOR TRAVEL SICKNESS

## VICTORIA—Continued

that copies had been sent to all States, and that the book would be published according to schedule.

Mr. Johnson reported also that the draft of the B.P. Dose Book had been returned from Dr. Byron L. Stanton with Therapeutic Comments Column completed. It was now possible to complete the list by filling in the A.P.F. prescriptions prescribable under the Pensioner Medical Services, and featuring each of the B.P. drugs listed.

The Secretary suggested that this task might be undertaken by Mr. F. H. Burton. He had discussed this with Mr. A. W. Callister and Mr. Burton, and both were agreeable. It was resolved that this suggestion be adopted.

Mr. Johnson said that an early meeting of the A.P.F. Management Committee would be called to discuss the details.

**Dispensing for Pentridge.**—A letter was received from one of the two members who had undertaken dispensing for Pentridge Gaol on alternate days. He reported that he had received a communication intimating that as services would now be required on only one half-day per week he was no longer required. After discussion of the matter by the Council, it was resolved that a letter be sent to the Director-General of Gaols and Penal Establishments, pointing out that the provision of the service had been arranged by the Society on a roster basis, and seeking further information on the development reported. Members of the Council expressed the opinion that the Society might have expected to receive official advice in regard to any change in the arrangements it had negotiated.

**A.N.Z.A.A.S. Meeting.**—The Secretary tabled a copy of a full page announcement prepared for the May issue of the Journal, and gave a brief resume of arrangements made at a recent joint meeting of the Section "O" Social Committee with the Society's Social Committee, for reception and entertainment of Interstate visitors.

**Quarterly Meeting.**—The Vice-President reported that an invitation had been extended to Dr. R. S. Andrews, Chairman of the Gas and Fuel Corporation, to address members at the next Quarterly Meeting, to be held in July. The Secretary said he had received advice that Dr. Andrews was absent from the State, and, consequently, a reply could not be expected for some days.

The Council agreed that arrangements should now be put in hand for a quarterly meeting in September next.

**Legacies.**—Mr. Long referred to a practice of some Societies requesting their members to consider making provision in their wills for bequests to Societies to which they belonged. He said the Pharmaceutical Society of Victoria had not received many benefactions in this way, and suggested that consideration be given to the matter. Resolved that the Executive consider the suggestion made.

**Financial.**—The Honorary Treasurer submitted the monthly financial statement, and accounts totalling £3437/19/4 were passed for payment.

The meeting then adjourned.

## THE P.D.L.

## Directors' Meeting

The 372nd meeting of the Directors of Pharmaceutical Defence Limited was held at 24 St. Francis street, Melbourne, on June 15, at 9.40 a.m.

**Present:** Mr. E. W. Braithwaite (in the chair), Messrs. I. H. Barnes, N. C. Cossar, F. N. Pleasance, C. C. Wallis and the Secretary.

When it was learnt that Mr. Cornell's absence had been occasioned by the death of his mother, the Sec-



retary was instructed to convey to Mr. Cornell the sympathy of his colleagues.

**Correspondence.**—Formal correspondence was tabulated and the following were amongst the letters dealt with:—

To Mr. Wm. Wishart, of Geelong, and Mr. G. E. A. Taylor, of Ballarat, thanking them for their assistance as witnesses in the defence of a member in a case heard at the Daylesford Court recently.

To the Town Clerk, City of Melbourne, forwarding the name of Mr. E. W. Braithwaite as nominee of this company for the city voters' roll (Bourke Ward).

From Melbourne Fire Office Ltd., forwarding some copies of a booklet, "Facts About Tariff Insurance in Australia," and drawing attention to some passages in the booklet.—Following discussion, and to facilitate location of the P.D.L. offices in the Guild Building on the part of members and prospective members desiring information on insurance matters generally, it was resolved, on the suggestion of Mr. Pleasance, that the P.D.L. announcement in the Journal be varied so as to stress the location of the P.D.L. offices on the fourth floor.

**New Members Elected.**—Messrs. J. L. Blyth, Elwood; L. N. Harmer, Glen Waverley; H. C. Jenkin, Bentleigh; W. R. Langford, Moe; J. W. Miller, Alexandra and T. W. Templeton, Mordialloc.

**Legal Advice.**—A member notified that he was negotiating with the agents of his pharmacy premises for a lease and he sought advice on any essential pitfalls to avoid.—The solicitor's advice was that the most important point to watch was whether the lease was for three years or upwards, which had the effect of having the lease excluded from the regulations, leaving the tenant as somebody who could be ejected at the end of his lease without any difficulty. Another necessary provision was to have the right to assign the lease to a suitable person. Unless such a provision was included it might be difficult at any time to make a sale.

**Health Department Analyses.**—The Secretary reported that, as instructed, he had written to the Director-General of Health, Canberra, asking if the Department would confirm that its letter to a member in terms that were somewhat ambiguous might be taken as a withdrawal of the allegations made against the member. If so, advice to that effect would be regarded as satisfactorily closing the matter. The Secretary said he had not had a reply to this letter as yet.

**W.A. Case.**—The W.A. Branch Secretary forwarded on May 23, a copy of the Coroner's finding and comments on the inquest touching the death of a baby. The Coroner placed the responsibility for this happening on the doctor. His comment was that the doctor had "failed to order proper treatment for the patient and fell into serious error in ordering administration of 16 oz. of liquor. ferri perchlor, which caused the death of the patient." His finding was that the child had died from asphyxia caused by disturbance of the acid alkaline balance by ferric perchloride administered on instructions of the doctor.

**Claims.**—Negotiations on two claims that had been before recent meetings were proceeding.

**Financial.**—The Hon. Treasurer presented the monthly financial statement, and accounts totalling £627/12/10 were passed for payment.

The meeting closed at 12.25 p.m.

## THE GUILD

**S.B.C.  
Meeting**

The State Branch Committee of the Victorian Branch of the Guild met at Guild House, 18 St. Francis street, Melbourne, on May 31, at 8 p.m.

**Present.**—Mr. N. F. Keith (Acting President and Chairman), Messrs. L. Hamon, J. W. D. Crowley, E. Scott, D. McColl, J. F. Oaten, I. R. Keelan, S. M. Adams, W. R. Iliffe, L. J. Gough, F. J. Gregory, J. J. Cocking,



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## VICTORIA—Continued

A. H. Riddiford, A. O. C. Blake, T. Payne, J. I. Richards, F. H. Bedford, H. V. Gear, W. L. Hilyard, K. G. Attiwill and W. J. Wright (Asst. Secretary).

**District Elections.**—Reporting on the nominations received for delegates to the State Branch Committee in respect of those districts whose delegates are due to retire, Mr. Richards, Returning Officer, advised that only in the case of district 2a, the number of nominations received was in excess of the number of positions vacant, making an election necessary in this district only. In all other even number districts, except in the case of district No. 14, only one nomination was received for each position vacant. No nominations were received for district No. 14, and it was moved by Mr. Iliffe, seconded by Mr. Oaten, and carried, that legal advice be sought regarding the position of this district.

It was moved by Mr. Crowley and seconded by Mr. Hamon that it be remitted to Federal Council that in future elections nomination papers should not be posted to every member in the relative districts, but should be available at the State Office on request. This motion was lost on a show of hands.

A further motion was presented by Mr. Crowley that Federal Office be asked to investigate a method of making provision for co-opting a delegate to the State Branch Committee with full voting rights to fill a vacancy, if such should occur. This motion was seconded by Mr. Gear, but was not put to the vote, as a result of Mr. Scott's suggestion, which was accepted, that the matter be left in abeyance until the next meeting, when the result of the proposed interview with the Guild's solicitor will be known.

It was agreed that the date for closing of the ballot to be held in district No. 2a be July 4, 1955.

**New Member of Executive.**—It was moved by Mr. Gregory, seconded by Mr. Adams, and agreed, that Mr. Iliffe be co-opted to the Executive to fill the vacancy caused by Mr. Lee's absence.

**Pricing of Scripts.**—It was agreed that the Executive should arrange insurance to cover scripts in the office and in transit which are being priced on behalf of members.

**Lodge Pool System.**—It was decided to refer to the Lodge Committee the request of Mr. Attiwill for information as to whether the Lodge Pool System is operating satisfactorily or otherwise.

**Trade and Commerce.**—Much discussion took place regarding the difficulty of a Chairman in satisfactorily filling this position whilst running his own business at the same time. Employment of a qualified pharmacist by the Guild to act as a reliever was discussed, also the alternative of an honorarium to Chairmen of Committees.

Mr. Iliffe was nominated as Chairman of the Trade and Commerce Committee by Mr. Gregory, and was automatically elected. Mr. Richards offered every help which he could give to assist the Chairman in his duties.

**Finance Committee.**—Mr. Scott moved that a Finance Committee be formed and that it consist of the Treasurer, Mr. Bedford, and Mr. Adams. Mr. Iliffe seconded this motion, which was carried.

Mr. Scott moved that the function of the Committee be to examine all monies proposed to be spent by the State Branch Committee for special purposes and report back as to its effectiveness and availability. Mr. Iliffe seconded this motion, which was also carried.

**Anzac Day.**—It was moved by Mr. Gregory, seconded by Mr. Cocking, and agreed, that the Chemists' Sub-Branch of the R.S.L. be approached with a view to soliciting its support to have the Act amended to permit the selling of urgent medicines not on a doctor's prescription behind closed doors on Anzac Day.

**Federal Report.**—The Federal report was presented by Mr. Scott and received by the Committee.

**Pricing Report.**—The Pricing report was adopted, subject to the question of On-Cost Margins being deferred for another month.

**New Members Elected.**—Messrs. A. J. Ford, Fitzroy; J. R. Morris, Numurkah; G. K. Sunner, Glen Waverley.

**Unfinancial Members.**—It was decided that the Guild Solicitor be requested to institute proceedings to recover unpaid subscriptions from unfinancial members.

**Junior Employees.**—Mr. Blake moved that, owing to the steep upward trend of overhead expenses today, immediate and strong steps be taken by the Guild to remove in its entirety the anomalies section of the wages award of Shops Board No. 6, whereby a pharmacist can employ only one Junior Female Shop Assistant per shop. This motion was seconded by Mr. Gregory and carried, and it was agreed that the Executive should refer the matter to the Wages Committee.

It was moved by Mr. Crowley, seconded by Mr. Blake and agreed, that the Wages Committee also consider the introduction of junior male labour into pharmacy.

The meeting closed at midnight.

## DEATH FROM CHLOROMYCETIN

A verdict of death by misadventure was returned at the inquest at Hammersmith on a five-year-old girl who had died from aplastic anaemia following the administration of Chloromycetin.

The child's doctor said that on April 5, 1954, he prescribed a Chloromycetin preparation, one teaspoonful three times a day for bronchitis. He based this dosage on the child's age. The dosage was continued for three days, and the bronchitis cleared up quickly. On November 24, 1954, the child was brought to him with a rash on the face and legs and enlarged tonsils. He did not connect her state with the use of Chloromycetin. The child was taken to the hospital, where anaemia was diagnosed. On November 29 the child was very ill, a blood count was taken, and the child was removed to hospital on December 1.

In hospital she was given nine blood transfusions at intervals of from one to three weeks, the last being on February 26, 1955. A gradual deterioration followed, and she died on March 3.

The report of the pathologist (Dr. Camps) said that the dose of Chloromycetin was well within the normal limits. Aplastic anaemia was regarded as one of the side effects of Chloromycetin. He did not think that a medical practitioner could forecast the condition, and blood counts were not always practicable. Once the condition of anaemia had started, treatment might make no difference. Chloromycetin had to be used with discretion; the risk had to be taken into consideration. Aplastic anaemia following the use of Chloromycetin was an extremely rare complication.—The Pharmaceutical Journal, April 30, 1955.

## OVERTREATMENT OF DERMATITIS

Effects of certain pharmaceuticals on skin, after prolonged use, are discussed in a report to the A.M.A. Council on Pharmacy and Chemistry by Dr. L. Edward Gaul (J.A.M.A., 157, 720 (Feb. 26, 1955)). Dr. Gaul states: "The commonest and most frequently over-treated of dermatoses seen in practice is contact dermatitis. . . . Current dermatological proprietary drugs have induced so much overtreatment that they should be contra-indicated in contact dermatitis. Cutaneous infections are the second commonest dermatoses over-treated. These diseases for the most part receive only a clinical diagnosis, and on this basis they have been treated topically with the mercurials, sulfonamides, and antibiotics. . . . The art of medicine—time for diagnosis, time for development of immunity, time for repair and healing processes to proceed uninterrupted—has been temporarily lost in the broad spectrum of the wonder drugs."—Extract from "Progress in Medicine," April, 1955.

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# QUEENSLAND

## PERSONAL and GENERAL

### State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in Queensland, Miss D. Brighouse, phone B 8407.

**Mr. A. D. Phillips** has been transferred by Monsanto Chemical (Aust.) Ltd. to its Victorian Branch.

**Mr. P. J. Sullivan** has opened a second pharmacy at Zillmere, which will be conducted as the Zillmere Pharmacy. This latest pharmacy makes Mr. Sullivan's fifth business.

**Mr. F. B. Hosking** has returned to Surfers' Paradise after spending a holiday at Hayman Island. During his absence **Miss Pat Browne** was in charge of his pharmacy at Surfers' Paradise.

**Interstate Visitors** to Brisbane during the month included the Federal President of the Guild, **Mr. Eric Scott** and the Federal Director of Pharmaceutical Relations, **Mr. K. G. Attiwill**. During their visit a special meeting of the State Branch Committee was held for discussion on matters of general interest.

**Appointment to South Coast Hospitals Board.** — Congratulations to **Mr. C. A. Edwards**, Edward street, City, who has been appointed a State Government representative to the Brisbane and South Coast Hospitals Board.

**New Member for Guild Committee.** — At the June meeting of the Guild State Branch Committee, the Vice-President, **Mr. C. A. Nichol**, in the absence of the President, extended a welcome to **Mr. Ron Ward**, of Moses Ward & Son, who had been co-opted to fill a vacancy on the Committee. It is pleasing to report that in serving on the Committee, Mr. Ward is following in the footsteps of his father, the late Mr. G. W. Ward, who was State Treasurer and a member of the Guild Committee for many years. Mr. Ward is the energetic secretary of the Chemists' Bowling Club, and it is hoped that his association with the Guild Committee will prove both interesting and pleasurable.

**Engagement.** Congratulations to **Mr. John V. Stitt**, of Dalby (formerly of Kedron) on the announcement of his engagement to **Miss Lorraine G. Berton**, of Dalby.

### WEDDINGS

Congratulations and good wishes for the future are extended to:

**Mr. R. E. Robins**, of Wynnum, whose marriage to **Miss June Benjamin**, also of Wynnum, was celebrated at St. Augustine's Church, Hamilton, on May 14.

**Mr. J. F. McDonald**, of Geebung, who was married to **Miss Patricia Benbow**, also of Geebung, in the Holy Spirit Church, New Farm, on May 14.

**Mr. O. F. Sibbles**, of Brisbane (formerly of Yarraman), who was married to **Miss Lorna Leonard**, of Atherton, in the Roman Catholic Church, Wilston, on June 18.

### OBITUARY

It is with deep regret that we report the death in Brisbane on June 4 of **Mr. Ken Dupuy**, of Mackay. Mr. Dupuy, who qualified in 1930, had been in business at Mackay for many years and his death at a comparatively early age came as a shock to his many friends.

Sincere sympathy is extended to Mrs. Dupuy and her two children in their bereavement.

Two pharmacists who suffered bereavements during the month are **Miss Chalmers**, of Taringa, owing to the death of her mother and **Mr. P. M. Benjamin**, of Wynnum, on account of the death of his wife. To Miss Chalmers and Mr. Benjamin, sincere condolence is extended.

### CHEMISTS' BOWLING NOTES

Three rinks from the Chemists' Bowling Club visited the Toowong Club for a mid-week game on June 8. The chemists were badly beaten on the afternoon's game. The scores were:

	Chemists	Toowong
Brown, Atkins, Colledge, Dr. Waters	13	35
Allison, Colville, Ward, Bell . . . .	15	29
Riddell, Dowd, Gillies, Hall . . . .	26	20
	54	84

On June 19 members of the Chemists' Bowling Club visited the Indooroopilly club.

### PHARMACY BALL

Over 800 dancers enjoyed the 1955 Pharmacy Ball, which was held at "Cloudland" on June 3. A feature of the ball decorations was a large silver unicorn which hung over the balcony near the official alcove.

Streamers festooned the ballroom and at midnight hundreds of balloons were released from a net on to the 800 guests.

At 11.30 "Miss Pharmacy" (Miss Marie Herbert) was chosen and presented with a gold wristlet watch and other prizes. During the evening spot dances and monte carlo dances were enjoyed; prizes comprising cosmetic sets, toiletries, manœuvre sets, etc., generously donated by wholesalers and manufacturers were given.

Guests were received by the Vice-President of the Guild, **Mr. C. A. Nichol**, and **Mrs. Nichol**. Members of the official party were: **Dr. H. S. Patterson** (President of the B.M.A.) and **Mrs. Patterson**; **Dr. Dowling** (Commonwealth Health Department) and **Mrs. Dowling**; **Mr. S. B. Watkins** (President, Pharmacy Board of Queensland) and **Mrs. Watkins**; **Mr. R. V. S. Martin** (President, Pharmaceutical Society of Queensland) and **Mrs. Martin**; **Mr. H. Evans** (President, Queensland Pentagon) and **Mrs. Evans**; **Mr. R. Coulson** (Registrar, Pharmacy Board) and **Mrs. Coulson**, and **Dr. and Mrs. H. J. Gibson**, **Mrs. Gibson** being secretary of the ball.

Many pre-ball parties were held, among them being one at the home of **Mr. and Mrs. C. A. Nichol**, at St. Lucia, where the official party and members of the ball committee were entertained.

At the Belle-Vue Hotel, **Mrs. A. B. Chater** and **Mrs. L. W. Huxham** combined to entertain more than 20 guests. Another large party was held by **Miss Helene Uscinski** for 40 young people at her home at Coorparoo.

Congratulations are extended to the members of the ball committee, comprising **Mr. C. A. Nichol** (President), **Mr. H. Evans** (Vice-President), **Mrs. A. D. Gibson** (Secretary), **Mrs. L. Carlson**, **Misses N. M. Carter**, **L. M. Lightfoot**, **Messrs. L. W. Huxham**, **W. A. Lenehan**, **G. Z. Nichols**, **R. V. S. Martin**, **C. W. Noble**, **R. H. Lehmhase**, **R. Mann**, **L. Addison**, **C. Caris**, **J. Gentles**, **R. G. White**, **A. B. Williams** and **B. Page** for their efforts in making the Pharmacy Ball of 1955 an enjoyable and memorable occasion.





SAFETY SEALED

*Steadiflow*

BABY'S FEEDING BOTTLE

IN **PYREX**

to give you a bouncing  
bundle of baby profits

It's heat resisting! Easier to handle! Boils without breaking! And it has all the features that made the standard "Steadiflow" bottle your biggest seller in years. You're safer still with the new "Steadiflow" Pyrex Bottle.

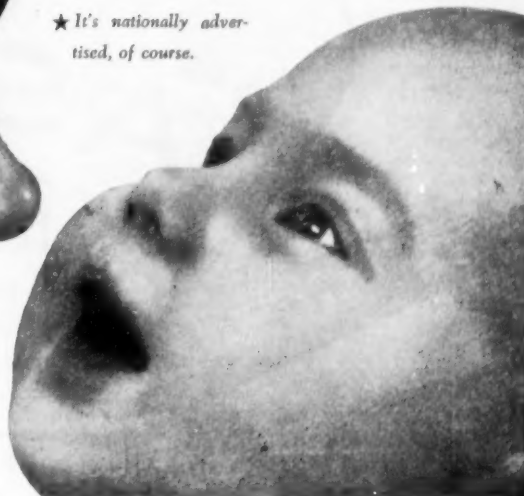
★ It's nationally advertised, of course.

**FOR A STEADY FLOW OF PROFITS  
ORDER NOW!**

	Wholesale	Retail
Steadiflow-Pyrex Feeder (complete)	52/- doz.	6/6 ea.
Steadiflow-Pyrex Replacement Bottle	26/8 doz.	3/4 ea.

N.B.: You can still obtain the "Steadiflow" standard bottle and replacements at usual prices.

Distributed by James Hara & Co. Pty. Ltd. for Farran Co.,  
409 Collins Street, Melbourne



## **BEX for quick turnover** **— steady repeats!**

The manufacturers of Bex stand squarely behind retailers, with national advertising in the press, over the air, and by display material at point of sale. The fine quality and effective action that has made the name Bex synonymous with pain relief throughout the length and breadth of Australia is rigorously maintained by unceasing supervision during every stage of manufacture. In recommending Bex for pain relief, and also for colds and 'flu, you take advantage of this profit-earning set-up and win the goodwill of your customers.

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## **Bex** powders - Tablets



**ASCOTIN**

**for the relief of pain**

**DOSE:**  
One or two tablets, repeated four-hourly if required.  
Relieves pain in Migraine, Headache, Dysmenorrhoea, Neuralgia, Earache, and after minor surgery.

Each tablet contains:  
Aspirin - - - - gr. 4  
Phenacetin - - - - gr. 4  
Codeine Phos. - - - - gr. 1/2  
F.H.F.8

**F. H. FAULDING & CO. LTD.**  
Manufacturing Chemists — Australia

## QUEENSLAND—Continued

### PHARMACEUTICAL SOCIETY

#### Council Meeting

The Council of the Pharmaceutical Society of Queensland met at Drysdale's Chambers, Brisbane, on May 12, at 7.30 p.m.

**Attendance.**—Mr. R. V. S. Martin (Chairman), Mrs. Carlson, Miss Chalmers, Messrs. R. S. F. Greig, L. A. Stevens, J. E. McCaskie, G. R. Wells, J. M. McKenzie, A. B. Williams and the Secretary.

**Packaging of Ethicals.**—The President said the reason for meeting half an hour earlier was to give consideration firstly to the enquiry which had been received from the Pharmaceutical Association concerning the packaging of ethicals. The Association at the Sydney conference had asked all States to furnish lists of ethical packages which they considered unsatisfactory for purposes of dispensing. At the last meeting, the President said members of the Council had been asked to give some thought and consideration to this matter and to bring lists of any ethicals which they considered unsatisfactorily packed.

Mrs. Carlson, Miss Chalmers, Mr. Wells, Mr. Martin and Mr. Stevens submitted preparations which they considered were unsatisfactorily packed. A list was compiled and the Secretary was requested to forward the information to the Pharmaceutical Association.

**Draft Copy of Reprint of Constitution.**—The Secretary submitted for the perusal of the meeting proof of reprint of the Constitution and Rules. Mr. Greig said he would check through the proof to see that everything was in order.

**Appointment of Vice-President.**—It was pointed out that under Section 11 of the Constitution it would be necessary to appoint a Vice-President in place of Mr. Mellick, who had resigned as a member of the Council.

Mr. Greig nominated Mr. Stevens. Seconded by Mr. Williams. There being no other nomination, Mr. L. A. Stevens was declared appointed Vice-President.

**Correspondence.**—To Registrar, Pharmacy Board, submitting for its information, copy of suggested scheme of Pharmaceutical Education, which was unanimously agreed on by the Society and Guild Committees.

To Principal, Central Technical College, advising that Queensland Pentagon has presented to this Society for the use of pharmaceutical students, a Vulcan Mixer. Enquiring if he would be willing to accept this and make it available as he deems fit at the College.

To Mr. Mellick, accepting with regret his resignation as a member of the Council, and thanking him for his services whilst a member of the Council; also conveying best wishes for the future.

To Miss Reuther and Miss Trotter, granting them leave of absence for their visit overseas and supplying them with a letter of introduction to the Secretary-Registrar of the Pharmaceutical Society of Great Britain.

From Pharmaceutical Society of Victoria, enclosing copy of letter from a correspondent regarding the composition of A.S.T. Tablets.

From Australasian Pharmaceutical Publishing Company, advising in view of important business to come before next annual meeting of the journal publishing company, the Board of Management has decided to seek the views of the Pharmaceutical Societies on the possibility of their arranging the attendance of members or substitute representatives at the annual meeting if such could be arranged immediately following the meeting of A.N.Z.A.A.S. in Melbourne in August next.

Mr. Greig moved that if the annual meeting of the publishing company is held on the date suggested and it is found that no member from Queensland is attending who could represent this Society at the meeting,

this Council will appoint a proxy delegate from one of the other States, and submit any information to him on behalf of this Society. Seconded by Mr. McCaskie. Carried.

From Parke, Davis & Co. Ltd., advising that the Company is continuing its prize for 1955 for the best final year students in each State to visit Sydney and be the guests of the Company in January, 1956.

**Applications for Membership** were approved as follows:

**Life Member by Subscription.**—Mr. Greig said he had much pleasure in moving that Mr. R. V. S. Martin be elected to Life Membership of the Society. Seconded by Mr. Williams. Carried.

**Full Members.**—Mrs. B. J. Collins, Messrs. J. K. Brosnan, J. H. McHugh, G. R. D. Charles, L. Cristaudo.

**Associate Member.**—Miss P. C. Hitzke.

**Poisons Regulations Requirements.**—It was reported that Bethal Tablets have been increased in size and now do not come under Schedule IV of the Poisons Regulations. The same applied to "Asmolets." They had been increased in size and the Ephedrine content reduced, and they were now off the restricted list.

**Film Evening.**—Mr. Greig said as requested from last meeting, he had arranged with the Vacuum Oil Company to present a film evening on June 28. The evening should prove very interesting.

The meeting closed at 10 p.m.

### THE GUILD

#### S.B.C. Meeting

The State Branch Committee of the New South Wales Branch of the Guild met at Drysdale's Chambers, 4 Wickham street, Brisbane, on June 2.

**Attendance.**—Messrs. C. A. Nichol (Vice-President, Chairman), W. E. Martin, F. H. Phillips, E. M. Ward, L. Hall, J. J. Delahunty, A. B. Chater, A. Bell, L. W. Huxham, C. W. Noble and the State Secretary.

**Welcome to Mr. Ward.**—Mr. Nichol extended a very warm welcome to new committee member, Mr. Ron Ward. Mr. Nichol said Mr. Lenehan regretted that he could not attend the meeting, because he was particularly pleased that Mr. Ward had been able to fill the vacancy on the committee. Mr. Lenehan served on the committee with Mr. Ward's father, the late Mr. G. W. Ward, and with Mr. Ron Ward now a member of the committee, it was another generation coming on to the committee. Mr. Lenehan had asked him to extend a very warm welcome to Mr. Ward on his behalf.

Mr. Ward in reply thanked Mr. Nichol for the welcome and said he looked forward to his association with the committee.

**Publication of "Gilseal News."**—Mr. Nichol said all members would now have received the combined issue of the "News" and he thought every one would be impressed with the new publication. The thanks of the committee were due to the Secretary for having undertaken the design of the block for the State heading. Mr. Martin and Mr. Hall supported the Chairman's remarks.

**Report of Trade and Commerce Sub-Committee.**—For the information of the meeting, Mr. Delahunty read the correspondence which had passed between this office and the Federal Merchandising Manager since the last meeting concerning the proposed conference of trade and commerce officers. It was now agreed that Queensland should send a second delegate, expenses for same to be paid by this Branch. The conference would be held in approximately two months' time.

Mr. Delahunty reported that the Trade and Commerce Sub-Committee had met since last meeting and had drafted some items for discussion at the forthcoming conference.

Mr. Martin moved that the recommendations as submitted by the Trade and Commerce Sub-Committee for discussion at the conference in Melbourne, be sent as

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Mr. Martin moved that the recommendations as submitted by the Trade and Commerce Sub-Committee for discussion at the conference in Melbourne, be sent as

## QUEENSLAND—Continued

recommendations where they do not conflict with the agenda already submitted, and that the names of the Queensland delegates be confirmed. Seconded by Mr. Phillips. Carried.

**Proposed Pricing Meeting.**—Mr. Chater said he had received a letter from the Federal Secretary advising that it is proposed to hold a Pricing Officers' conference during the first week of September. The items which were set out in the notice of meeting would be considered at the conference, and if any members of the Committee had any items for consideration at such a conference, he would like them to submit them as soon as possible.

Mr. Chater moved that the Secretary write to the Federal Secretary and try to get further elaboration of the agenda; secondly, that the present agenda should lie on the table until next meeting, when it would be further discussed; and thirdly, that this State will be represented at such a conference. Seconded by Mr. Noble. Carried.

**Visit of Federal President and Federal Director of Pharmaceutical Public Relations.**—Mr. Nichol reported that Mr. Scott and Mr. Attiwill were desirous of coming to Brisbane on June 16 for a special meeting of the State Branch Committee for the purpose of discussing the Family Health Magazine. He hoped all members would endeavour to be present at that evening.

**Tablet Price List.**—Mr. Chater reported that the completed reprint of the tablet price list would be to hand shortly. More tablets had been added to the list and plenty of space was also provided.

Mr. Chater said he would like permission of the Committee to send out a covering letter drawing attention to the new set-up, pointing out a few of the new tablets added and asking that in the event of there being any errors in pricing, members should advise the office.

Mr. Martin moved that permission be granted. Seconded by Mr. Noble. Carried.

Mr. Phillips moved that a vote of appreciation be included in the minutes for the work executed by Mr. Chater in the compilation of the tablet list. Seconded by Mr. Phillips. Carried.

**Correspondence.**—To Mr. P. M. Benjamin, expressing sympathy in the passing of Mrs. Benjamin.

To Mr. K. G. Attiwill, Pharmaceutical Public Relations, advising that the S.B.C. would enthusiastically support a Queensland supplement as proposed. Members had been asked to give some thought to a caption for the supplement.

To N.S.W. Branch Secretary, enquiring if, in future, the retail list could be dated ahead of publication so that there would not be such a long lapse between the date on the list and the time when members received the copy. Also enquiring if, when a new list is to be published and there is a price alteration at the same time, the line which has changed in price should be indicated by an asterisk.

Reply stating when the new list is distributed, an alteration sheet showing the changes which have taken place during that period between the correction of page proofs and the actual production of the price lists will be included. Mr. Delahunty said the position could be rectified if amendment sheet No. 1 with the alterations up to date, was issued with the new list.

From Federal Secretary (1) Attaching copy of communication received from P.D.L. with regard to Commonwealth Health Department enquiries and analyses. Seeking the Committee's views. Mr. Chater said the same thing could happen identically anywhere in Australia and under the circumstances he felt that Federal Office should lay down a policy to be followed. After discussion, it was agreed that this matter should be deferred for discussion with the Federal President when he attends the meeting on June 16.

Mr. Nichol said another point he thought should be

pressed at the special meeting was that a list of percentage variations for which members were liable to be penalised for dispensing under the National Health Act should be drawn up and circulated.

(2) Advising that the Victorian Branch had asked for action to be taken in regard to sales tax on various chemists' sundry lines, and enclosing copy of the submission to the Federal Treasurer with regard to these items. This Branch supports the representations. A further letter was received attaching the Federal Treasurer's acknowledgment of the application and advising that the matter is being reviewed.

(3) Attaching copy of information sheet dealing with Repatriation Dispensing, which had been sent to every Guild Member.

From Federal Merchandising Manager (1) Announcing the introduction of a new Transistor Hearing Aid which will be called the "Vox." Members are being advised. (2) Forwarding copy of communication sent to members concerning "Paigees."

From Honorary Secretary, N.U.P.S.A., advising that sufficient evidence is required to prove that a Commonwealth Science-Pharmacy Scholarship should be granted by the Commonwealth Government. Seeking the Guild Committee's assistance in the hope of enlisting the Guilds' support in N.U.P.S.A.'s representation to the Universities Commission. Mr. Nichol said this matter had been considered by the Pharmacy Board and it was found that tertiary level was only in the third year of the Pharmacy Course. Mr. Martin pointed out that the Federal Council of the Guild had given aid to N.U.P.S.A. in this matter. Mr. Noble moved that N.U.P.S.A. be advised that the Committee is in agreement with what was desired. Seconded by Mr. Martin. Carried.

Federal President's letter to members—consideration to be given on legal opinion on hospital dispensing. Mr. Martin said he had the information to submit. It was agreed that a copy of the opinion should be made available to all committee members for their perusal. Mr. Scott to be advised what action is being taken and that the matter will be discussed with him when he comes to Brisbane later in the month.

**Federal Report.**—Mr. Martin (Federal Delegate) advised that anything he had to report was contained in the Federal President's letter to committee members.

**Date of Annual Meeting.**—It was resolved that this year's annual meeting be held on Tuesday, August 30.

**Appointment of Returning Officer.**—Mr. Noble proposed, Mr. Bell seconded, that Mr. Delahunty be Returning Officer this year.

The Secretary reported that the retiring members this year were Messrs. A. Bell, A. W. Eberhardt, L. Hall, L. W. Huxham, A. N. C. Munro, G. Nolan, and W. A. Lenehan.

It was resolved that nominations for membership of the State Branch Committee be invited from members.

**Pricing Lecture.**—Mr. Chater reported that he would be giving a pricing lecture to the students on June 7. Last year Mr. Lenehan gave a short preliminary address on the aims, objects and functions of the Guild, and he suggested that something similar might be done this year. Mr. Nichol said if Mr. Lenehan was unable to do this, he would be happy to provide a brief resumé of the activities of the Guild.

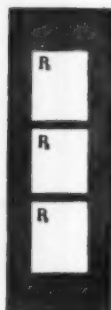
**Prescribers' List for P.M.S.**—Members referred to the poor quality of the Prescribers' List for P.M.S. They felt that representations should be made to have a book something along the lines of the A.P.F. made available.

After discussion the Secretary was requested to communicate with Federal Office urging that when the Prescribers' List for P.M.S. is reprinted, representations be made to the Government for it to make a better book available, similar to the A.P.F.

**Over-the-Counter List.**—Members were asked to give some thought to additional lines that could be added to the over-the-counter list, as this item would be on the agenda for discussion at next meeting.

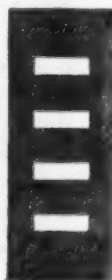
The meeting closed at 11.15 p.m.

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Tasmania—Irvine McEachern (1934) Pty. Ltd., Launceston; F. Fairthorne & Sons, Hobart.

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(PHOLCODINE LINCTUS)

permits

## QUIET, UNINTERRUPTED SLEEP

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For children, SEDNINE is indicated whenever a cough sedative is considered advisable, particularly in the treatment of whooping cough, irritation of the upper respiratory tract, and the cough associated with enlarged tonsils and adenoids before surgical measures are taken.

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MEAN BIG PROFITS FOR YOU**

	Wholesale	Retail	Profit on Cost
Sednine	38/- doz.	4/9 ea.	= 50%
Sednets	30/- doz.	3/9 ea.	= 50%

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Surgical Instrument & General Showrooms 41 HUNTER STREET, SYDNEY

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# SOUTH AUSTRALIA

## PERSONAL and GENERAL

### State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in S.A., Mr. E. F. Lipsham.

**Mr. P. Wescombe** has joined the staff of Mr. R. Coultas, of Hanson street, Adelaide.

**Mr. D. Fenn** has closed his pharmacy in Largs Bay, and joined the staff of Mr. A. Twer, of Henley Beach.

**Mrs. J. Hissey**, of Yankalilla, has returned to her home State of New South Wales.

**Mr. P. Keiper**, of Kensington, has opened a branch pharmacy on Parade avenue, Magill.

**Mr. G. Kinnear** spent his first vacation in the medical course as manager for Mr. O. Conley, of Gawler.

**Mr. J. C. White** has resumed duties after his holiday trip to Colombo.

**Mrs. B. Hill** managed the Morphettville pharmacy of Mr. E. Sauer for the second week in May.

**Mr. R. Brice** was temporarily in charge of F.S.M.A. at Exeter during May.

**Mr. D. Bulk** is now managing the Edwardstown branch of F.S.M.A.

**Miss N. Gerard** assisted Mr. D. Fleer, of Hampstead, towards the end of the month.

**Mr. J. M. White** has been acting as locum for Mr. V. Fountain, of Cheltenham.

**Mr. M. I. Brady, Snr.** has been assisting Mr. E. W. S. Scott, of Keswick.

**Mr. J. H. Gould**, of Hobart, Tasmania, called in at Adelaide on June 3 en route to England.

**Mr. E. Hillman** is now acting as manager to F.S.M.A. at Reade Park.

The Friendly Societies' Medical Association closed their Albert Park branch in the early weeks of June.

**Mr. D. Farley** acted as relieving manager for Mr. V. Mitchell, of Prospect, during May before going for three weeks to Mr. W. Willis, of Mt. Gambier.

**Miss N. Gerard** has been assisting Mr. J. Measday and Mr. P. Tonkin at the pharmacies conducted by Mr. H. E. Martin in Rosewater.

During the early part of June **Mr. R. L. Jones** revisited his old pharmacy in McLaren Vale, to allow Mr. D. P. Jones a short vacation.

**Mr. J. Hulbert** closed his pharmacy in Warradale during May to take up the managership of Lyons-Chemist in Glengowrie.

**Mr. K. Topperwien** has taken over the managership of the branch pharmacy at Belair conducted by Mr. Rex Daniel, of Blackwood.

**Mr. B. Kildea** was in charge during the latter part of May of the pharmacy conducted by Mr. H. Flitts, of Kilkenny.

**Mr. G. Kamm** has resigned his position with Mr. P. Roberts, of Parkholme, and joined the staff of Carrig Ltd. at Hindmarsh.

**Mr. R. Chesney** resigned as manager of F.S.M.A., Unley, to act as reliever for Mr. W. Murton, of Kingston, before embarking at the beginning of June for England.

**Mr. A. G. Mathieson** has taken advantage of reciprocal agreements, and arranged for transfers to both the Victorian and New South Wales registers of pharmacists.

**Mr. J. Lloyd** acted as locum for Mr. J. Groobv, of Prospect, for the latter end of April before spending the month of May assisting Mrs. L. J. Maloney at Kilkenny.

**Mr. J. Maine**, gold medallist of 1955, spent most of

May in his home town of Nuriotpa to relieve Mr. A. Reusch; he then assisted his one-time master, Mr. J. Bird, of Fullarton.

**Mrs. C. Wilkins** has resigned her position in Warren's Pharmacy, John Martin & Co., to have an intended holiday before taking up relieving appointments.

**Mr. B. Wandke** has been assisting Messrs. Porter and Penhall, mainly at their Albert Park pharmacy, but as manager of Royal Park during the last week of May, when Mr. Penhall had a short holiday at Christies Beach.

**Miss P. Stanley** has taken out reciprocal certificates with the Pharmaceutical Society, London. She sailed for England early in June, having resigned from F.S.M.A. at Realu Park. She plans to spend some time in England, go to Edinburgh for the Festival, then to the Scandinavian countries, and back to England before a tour of the Continent.

**Bill to Ban Heroin**.—Legislation to prohibit the possession and use of Heroin in South Australia was introduced by the Minister of Health (Sir Lyell McEwin) in the Legislative Council during the month.

## ENGAGEMENT

**Southwood—Gilbert**. — The engagement is announced of Judith, elder daughter of Mr. and Mrs. R. C. Southwood, of Bravville North, to Harold, only son of Mr. and Mrs. W. F. Gilbert, of Brooklyn Park.

**Marriage**.—On May 7, in St. Patrick's Church, Grote street, Adelaide, the wedding of Mary O'Laughlin, daughter of Mr. and Mrs. J. R. O'Laughlin, of 168 Park Terrace, Wayville West, and Gilbert B. Harnett, son of Mr. and Mrs. W. L. Harnett, of 2 Belair road, Torrens Park, Adelaide, was celebrated.

## BIRTH

**Sauer**.—On May 21, at Calvary, to Jose and Sam—a daughter.

**Clerk** (nee Miller).—To Nancy and Tom, at Memorial on May 18—a daughter (Josephine Anne).

**Evans**.—To Pam and Tony—a son. Lived two days.

## DANGEROUS DRUGS LEGISLATION

### New Bill Foreshadowed

The Chief Secretary, Sir Lyell McEwin, gave notice in the Legislative Council during the month of intention to introduce a Bill to amend the Dangerous Drugs Act.

## THE USE OF DYESTUFFS IN FOODS

A spokesman for the Central Board of Health stated during the month that prosecutions and warnings to manufacturers had stopped the use of dangerous dyes in South Australian tinned foods. In all cases, he said, the manufacturers had used dyes not on the approved list. The statement was made in connection with the report that a food advisory committee was seeking revision of the list of prohibited dyes to ensure that no "suspect" dyes were used in South Australia.

## CHILDREN POISONED

A 10-month-old boy from Bowden was admitted to the Children's Hospital on May 15 suffering from poisoning as a result of swallowing rat poison.

On June 20 a two-year-old boy and a girl of 18 months were admitted to the hospital after drinking a hormone preparation prepared for spraying berry bushes.

Malcolm Ross Tiller, two years of age, of Warner-town, died in the Port Pirie Hospital after drinking weed poison, which he found in a shed at the Warner-town tennis courts.

## SOUTH AUSTRALIA—Continued

### MR. H. C. MARTIN RELINQUISHES SOME OFFICIAL DUTIES

Our Secretary, Mr. H. C. Martin, who has been with us for 10½ years, has found the expansion of his practice as a consultant and company director necessitates some curtailment of his activities in other directions.

Rather than resign his interest in pharmacy, he has suggested to the Council of the Pharmaceutical Society and the Board that a member of his staff should be appointed as his assistant.

The Board and the Council, being desirous of retaining Mr. Martin's services in a consultative capacity, has agreed to try out the suggestion, and Mr. C. A. Edwards has therefore been appointed to the position. Mr. Edwards is an associate in commerce of the University of Adelaide, and has had considerable experience in secretarial and other business activities. Mr. Edwards was for some time employed in the office of the Registrar of Companies, where he held the official position as Deputy Registrar.

### AMENDMENT OF REGULATIONS UNDER THE FOOD AND DRUGS ACT

A series of amendments of the regulations relating to foods and drugs was published in the South Australian Government Gazette on June 2.

Amendments of direct interest to pharmaceutical chemists are published hereunder:—

#### Organic Phosphate Compounds:

The following regulation is inserted after Regulation 19:—

"19A. No person shall apply any phosphorus compound which has a systemic insecticidal action to any plant which, or the crop of which, is used for food, or sell any such plant or crop to which any such compound has been applied."

#### Labelling of Antibiotics:

7. Regulation 86 is amended by inserting after paragraph 5 the following new paragraph:—

"5A. The label of penicillin or other antibiotic substance shall include the words:—

"Caution: Sale in South Australia permitted on prescription only."

Provided that this requirement shall not apply to any preparation to which sub-paragraphs (ii) and (iii) of paragraph 4 of this regulation apply."

#### Permitted Colouring Matter:

8. Regulation 96, paragraph 1, is deleted, and the following paragraph inserted in lieu thereof:—

"1. The following substances shall be permitted colouring matters within the meaning and for the purposes of these regulations:—

Caramel.

Cochineal.

Saffron.

Chlorophyll and other vegetable colouring matters (except Gamboge and other harmful vegetable colouring matters, the use of which is hereby prohibited).

Coal-tar dyes as follows:—

184 Amaranth

185 Brilliant Scarlet 4R

179 Carmoisine

225 Chlorazol Pink Y

773 Erythrosine

— Ponceaux SX

777 Rose Bengale

— Scarlet GN

Orange GGN

16 Acid Yellow G (Kond)

— Sunset Yellow

640 Tartrazine

1180 Indigo Carmine

749 Rhodamine B

670 Light Green

671 Brilliant Blue

672 Patent Blue V

698 Acid Violet

— Brown HS (Chocolate NS)

— Thiazin Brown R

— Black 5410

— Brilliant Black.

(The numbers quoted are those given in the Society of Dyers and Colourists' Colour Index, edited by F. M. Rowe, first edition, 1924.)"

#### Poisons:

9. Regulation 99 is amended:—

(i) By deleting from Part I thereof the word "Dinitrocresols" in the item "Dinitrocresols; dinitronaphthols; dinitrophenols; dinitrothymols."

(ii) By inserting in Part I thereof:—

(a) Immediately below the words "Digitalis, glycosides of; other active principles of digitalis," the words "Di-isopropyl fluorophosphonate."

(b) Immediately below the words "Erythrityl tetranitrate," the words "Gallamine; its salts; its quaternary compounds."

(c) Immediately above the words "Nitrophenols (ortho, meta, and para); the words "Mustine; its salts."

(d) Immediately below the words "Paramino-benzoic acid, esters of; their salts," the word "Paramethadione."

(e) Immediately above the words "Phenylcinchoninic acid; salicylcinchoninic acid; their salts; their esters," the words "Phenylbutazone; its salts."

(f) Immediately above the words "Savin, oil of," the words "Polymethylenebis(trimethylammonium salts)." "

(g) Immediately below the words "Tribromomethyl alcohol" the word "Troloxidone."

(iii) By deleting from Part II, Class A, thereof the words:

(a) "O, O-diethyl O, p-nitrophenyl thiophosphate (parathion)."

(b) "Hexaethyl tetra phosphate (H.E.T.P.)."

(c) "Tetra ethyl pyrophosphate (T.E.P.P.)."

(iv) By inserting in Part II, Class A, thereof:—

(a) Immediately below the word "Chloropicrin" the words "Dinitrocresols (DNC; their compounds with a metal or a base."

(b) Immediately below the words "Nicotine; its salts," the words "Phosphorus compounds, the following:—Ethyl-paranitrophenyl-benzene thiophosphonate, hexaethyl tetraphosphate (HETP), 4-methylhydroxy-coumarin thiophosphate, paranitrophenyl diethyl phosphate, parathion, tetraethyl pyrophosphate (TEPP) triphosphoric pentadimethylamide."

#### Prohibited Poisons:

10. The following regulation is inserted after Regulation 105:—

"105A. Notwithstanding anything contained in these regulations, no person shall sell, purchase, store, keep, or have in his possession any of the following substances, namely:—

Diethyl thiophosphate of ethyl-mercapto-ethanol.

Dimefox.

Mipafox.

Schradan."

#### Labelling of Third Schedule Preparations:

11. Regulation 112 is amended by inserting after paragraph 4 the following new paragraph:—

"4a. No person shall sell any poison specified in the Third Schedule to this part of these regulations or one to which Part II of the Dangerous Drugs Regulations 1937 applies unless the container is labelled with the words: 'Caution: Sale in South Australia permitted on prescription only.'"

## SOUTH AUSTRALIA—Continued

### Amendment of First Schedule:

12. The First Schedule to Part V of the regulation is amended—

- (i) By deleting therefrom the words—
  - (a) "Dinitrocresols" in the item "Dinitrocresols; dinitronaphthols; dinitrophenols; dinitrothymols."
  - (b) "O, O-diethyl, O, p-nitrophenyl thiophosphate (parathion)."
  - (c) "Hexaethyl tetra phosphate (H.E.T.P.)."
  - (d) "Tetra ethyl pyrophosphate (T.E.P.P.)."
- (ii) By inserting therein—
  - (a) Immediately above the words "dinitronaphthols; dinitrophenols, dinitrothymols," the words "Di-isopropyl fluorophosphonate" and the words "Dinitrocresols (DNC); their compounds with a metal or a base, except substances containing not more than the equivalent of five per cent. of dinitrocresols."
  - (b) Immediately below the word "Ether" the words "Gallamine; its salts, its quaternary compounds."
  - (c) Immediately above the words "Nux vomica except substances containing less than 0.2 per cent. of strychnine" the words "Mus-tine; its salts."
  - (d) Immediately below the words "Para-amino-benzene-sulphonamide (sulphanilamide)," the word "Paramethadione."
  - (e) Immediately below the words "Pethidine (1-methyl-4-phenyl-piperidine-4-carboxylic acid ethyl ester); its salts," the words "Phenylbutazone; its salts," and the words "Phosphorus compounds, the following:—Ethyl-paranitro-phenyl-benzene thiophosphonate, hexaethyl tetraphosphate (HETP), 4-methyl-hydroxy-coumarin-diethyl thiophosphate, paranitrophenyl diethyl phosphate, parathion, tetraethyl pyrophosphate (TEPP), triphosphoric pentadimethyl-amide."
  - (f) Immediately above the words "Savin, oil of" the words "Polymethylenebis(trimethyl-ammonium salts)."
  - (g) Immediately below the words "Tribromomethyl alcohol" the word "Troxidone."

### Amendment of Second Schedule:

13. Part II of the second schedule to Part V of the regulations is amended by inserting—

- (i) Immediately above the word "Dinitrophenols" in the first column the words "Dinitrocresols (DNC); their compounds with a metal or a base," and opposite thereto in the second column the words "Substances being neither preparations for the treatment of human ailments nor preparations for use in agriculture or horticulture."
- (ii) Immediately above the words "Picric Acid," in the first column, the words "Phosphorus compounds, the following:—Ethyl-paranitro-phenyl-benzene thiophosphonate, hexaethyl tetraphosphate (HETP), 4-methyl-hydroxy-coumarin-diethyl thiophosphate, paranitrophenyl-diethyl phosphate, parathion, tetraethyl pyrophosphate (TEPP), triphosphoric pentadimethylamide," and opposite thereto in the second column the words "Substances other than preparations for use in agriculture or horticulture."

### Amendment of Third Schedule:

14. Part I of the Third Schedule to Part V of the regulations is amended by—

- (i) Deleting the word "Dinitrocresols"; in the item "Dinitrocresols; dinitrophenols; dinitrothymols; dinitronaphthols."

(ii) Inserting—

- (a) Immediately above the words "dinitrophenols; dinitrothymols; dinitronaphthols," the words "Dinitrocresols (DNC); their compounds with a metal or a base, except preparations for use in agriculture or horticulture."
- (b) Immediately above the words "Phenylcinchoninic acid, salicylcinchoninic acid; their salts; their esters," the words "Phenylbutazone; its salts."
- (c) Immediately above the words "Savin, oil of," the words "Polymethylenebis(trimethyl-ammonium salts)."

### Amendment of Fourth Schedule:

15. The Fourth Schedule to Part V of the regulations is amended by—

- (i) Deleting therefrom the words—
  - (a) "O, O-diethyl O, p-nitrophenyl thiophosphate (parathion)" in the first column and immediately opposite in the second column the words "Agricultural, horticultural and pastoral insecticides."
  - (b) "Hexaethyl tetraphosphate (H.E.T.P.)" in the first column, and immediately opposite in the second column the words "Agricultural, horticultural and pastoral insecticides."
  - (c) "Tetraethyl pyrophosphate (T.E.P.P.)," in the first column, and immediately opposite in the second column the words "Agricultural, horticultural and pastoral insecticides."
- (ii) Inserting—
  - (a) In the first column immediately below the word "chloropicrin" the words "Dinitrocresols (DNC); their compounds with a metal or a base," and immediately opposite thereto in the second column the words "Preparations for use in agriculture or horticulture."
  - (b) In the first column immediately below the word "Phosphorus" the words "Phosphorus compounds, the following:—Ethyl-paranitro-phenyl-benzene thiophosphonate, hexaethyl tetraphosphate (HETP), 4-methyl hydroxy-coumarin-diethyl thiophosphate, paranitrophenyl-diethyl phosphate, parathion, tetraethyl pyrophosphate (TEPP), triphosphoric pentadimethylamide," and immediately opposite thereto in the second column the words "Preparations for use in agriculture and horticulture."

### Amendment of Sixth Schedule:

16. The sixth schedule to Part V of the regulations is amended by inserting immediately below the word "Nicotine" the words "Phosphorus compounds, the following:—Ethyl-paranitro-phenyl-benzene thiophosphonate, hexaethyl tetraphosphate (HETP), 4-methyl hydroxy-coumarin-diethyl thiophosphate, paranitrophenyl-diethyl phosphate, parathion, tetraethyl pyrophosphate (TEPP), triphosphoric pentadimethylamide."

### Date of Operation:

17. The amendments made by these regulations shall come into operation as follows:—

- (a) The amendments made by regulations 1, 2, 3, 4 (iii), 6, 9, 10, 12, 13, 14, 15 and 16 shall come into operation upon the making of these regulations.
- (b) The amendments made by regulations 4 (i) and 4 (ii), 5, 7, 8 and 11 shall come into operation immediately upon the expiration of twelve months after the making of these regulations.

## PHARMACEUTICAL SOCIETY

### Monthly Meeting

The Council of the Pharmaceutical Society of South Australia met at 25 King William street, Adelaide, on June 7, at 7.45 p.m.

**Present.**—Mr. A. C. Holloway (President) in the chair, Messrs. E. F. Lipsham, K. D. Johnson, D. F. J. Penhall, A. A. Russell, J. D. Duncan, Walter C. Cotterell, the Secretary and Assistant.

**Correspondence.**—Letter to "A.J.P." forwarding cheque for New South Wales Flood Relief and acknowledgment.

Consideration was given to a letter from the Australian Publishing Co. Ltd., re its annual meeting. Mr. Walter C. Cotterell was appointed the Society's representative at the annual meeting to be held in Melbourne.

Correspondence has been received from the Department of Public Health regarding Trade Names of Drugs proclaimed under the Dangerous Drugs Act. It was decided to ask the Department to advise trade names of such drugs as they come forward from time to time.

**Linseed Report on Hospital Pharmacy.**—Correspondence has been received from the Pharmaceutical Society of Great Britain together with a copy of the Linseed report.

**Finance.**—Statement for the month of May was submitted and adopted, and accounts totalling £2052/6/6 were passed for payment.

**Professor Macbeth's Portrait.**—Notification of the completion of the painting of the portrait of Professor Macbeth was received.

A letter of congratulations was forwarded to Professor Macbeth on his election as an Ordinary Member of the Royal Australian Academy of Science, and his acknowledgment received.

**August Conversations at the University.**—A report was received that a Conversazione is to be held at the University on August 12 and 13. A proposed programme was submitted, and a further report will be made on the matter at the next meeting.

**University Administrative Staff.**—It was reported that two Deputy Registrars had been appointed at the University of Adelaide. The Secretary was directed to write a congratulatory letter to Mr. H. E. Wesley-Smith, who has been associated with the Board of Studies in Pharmacy.

**Post-Graduate Talks.**—The report of the sub-committee for the purpose of arranging a further series of talks for the benefit of members was submitted and adopted. The programme is—

Wednesday, July 20:

Antibiotics.

Sera and Vaccines, particularly the Salk Vaccine.

Barbiturates.

Thursday, September 8:

Topic of interest to all pharmacists.

Tuesday, October 18:

Antihistaminics.

Insulins.

Inaccuracies found in dispensing.

**Appreciatory.**—The President took the opportunity of thanking members for their support during the two years in which he had been President. The Vice-President of the Council conveyed to the President his appreciation of the manner in which he had presided over the various meetings, and was supported in his remarks by members of the Council.

## THE GUILD

### S.B.C. Meeting

The State Branch Committee of the South Australian Branch of the Guild met at 254 Sturt Street, Adelaide, on June 6, at 7.45 p.m.

**Present.**—Mr. Walter C. Cotterell (President), Messrs. H. G. Collyer, A. C. Holloway, G. K. F. Scott, R. R.

Patrick, E. Lloyd Miller, A. A. Russell, V. L. Mitchell and the Secretary.

**New Members Elected.**—Messrs. G. A. Scarman, Koongarra Park; H. W. Gilbert, Kidman Park; R. M. Symonds, Waikerie; P. V. Roberts, South Brighton; K. K. Topperwien, Belair; R. H. Evelyn, Allenby Gardens; B. and H. Lawton, Lobethal (Branch); A. G. Tiver, Parkside (Branch).

**Sales Tax Matters.**—Secretary to advise Federal Office that Douch Cans and fittings be included in the list for Sales Tax exemption.

**P.D.L.**—Secretary to advise Mr. Evans that this State approves of the matter involved.

**Public Relations Secretariat** (News Supplement).—General satisfaction was expressed in respect to the supplement. Mr. Attiwill to be written to and congratulated thereon; also a similar note to Mr. Lipsham.

**Relaxa Tabs.**—Secretary to notify Federal Merchandising Manager that this line is being sold by F.S.M.A. shops and ask him to have the practice stopped.

**Trade Conference.**—Resolved that Mr. G. F. K. Scott be appointed the delegate to the Trade Conference in Melbourne at a date to be fixed.

**Financial.**—Statement presented to the meeting was approved, and accounts totalling £267/13/- were passed for payment.

**S.B.C. Retirements.**—Messrs. Cotterell, Collyer, Holloway, Russell and Patrick will retire from the Guild S.B.C. by effluxion of time and are eligible for re-election.

Date for closing of nominations for S.B.C. was fixed for June 30, 1955.

Mr. E. Lloyd Miller was appointed Returning Officer for the election (if any) of members to the S.B.C.

The date for the closing of the ballot for members of the S.B.C. was fixed for July 30, 1955.

The date for the Annual General Meeting was fixed for August 30, 1955, at the Bohemia Tea Rooms, North Terrace, Adelaide. The Secretary was authorised to arrange for refreshments. It was suggested that the Federal President be invited to the Annual Meeting. The Secretary when sending out notices to emphasise that the meeting is for Guild Members only.

**New Managers' Log.**—Mr. Russell gave a resumé of this matter and of the appeal on the general employees' determination.

**Mutual Hospital Association.**—Resolved that Mr. Cotterell be authorised to approach one of the Directors personally.

**Hospitals Department.**—Secretary to send a copy of the letter to Mr. Hughes and ask for his remarks and comments.

**P.A.T.A.**—Secretary to notify P.A.T.A. that in the towns enumerated and also including Wistoe they should have the Chemist permits cancelled. The Secretary to contact Mr. Fleming in terms as discussed at the meeting.

**Rexona Pty. Ltd.**—Received. Secretary to notify Members that it is against Guild policy to support two for one offers and that the President take the matter up with Federal Executive.

**Country Meetings.**—Resolved that the next country meetings be tentatively fixed for Port Pirie in September and Murray Bridge in October.

**Federal Delegate's Report.**—The Federal Delegate (Mr. Walter C. Cotterell) reported upon the following matters:—Infra-Red Lamps; Vicks Vapo Rub; N.H.S.; Kleenex; Hudnut Ltd.; Family Circle; Pharmaceutical Benefits; Taxation of Friendly Societies; Akta Vite; Salmond & Spraggon Ltd.; Surgical Aids.

**Pricing Officer's Report.**—The Pricing Officer (Mr. G. K. F. Scott) reported upon the following matters:—Re query from Prices Department; Over-the-counter prices, of which details were submitted for approval and same to be sent to Federal Office when completed.

**General.**—Secretary to notify Federal Office re notices from Repatriation Department, suggesting that they be printed on one sheet and such to be perforated to insert in price folders.



**MANESTY**

ALL BRITISH EQUIPMENT

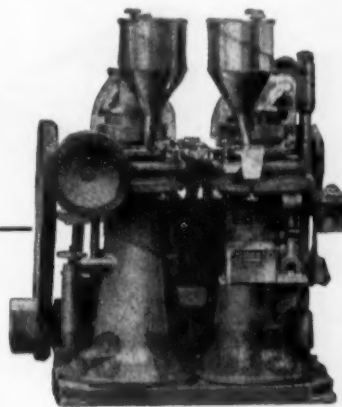
## DRYCOTA COMBINED TABLET MAKING AND COMPRESSION COATING MACHINE

The "Drycota" produces coated tablets in a fraction of a second without the use of skilled operators. Materials affected by moisture can now be coated by this dry method and more control over disintegration can be made. Coloured tablets, with or without engraving or embossing, can be produced in record time. No extra polishing process is required.

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### MANESTY MACHINES LIMITED

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## ★ Soluble Aspirin

Disprin is a stable and palatable preparation in tablet form which dissolves rapidly in water to produce a solution of calcium aspirin. Disprin combines the convenience of aspirin with the therapeutic advantages peculiar to calcium aspirin. Being soluble it affords quicker relief than acetylsalicylic acid with a much reduced risk of gastric irritation, even when administered in massive dosage, and being stable it is free from the unfortunate tendency of calcium aspirin to break down into unwanted decomposition products.



## DISPRIN

Regd.

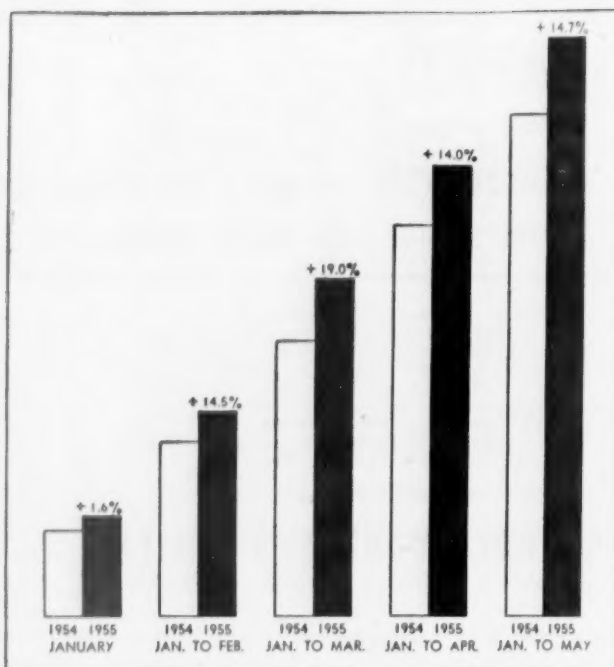
WELL-TOLERATED, RAPID IN RELIEF

★ Disprin tablets readily react in water to form a palatable solution of calcium aspirin.

RECKITT & COLMAN (AUSTRALIA) LTD. (Pharmaceutical Division), SYDNEY



## Factory sales to chemists are going up!



## Are your sales keeping pace?

Sales to chemists for the first five months of 1955 have topped the record 1954 period. Are you getting your share of this large volume, high profit turnover?

**Display Kotex Napkins and Belts:** Surveys show that 85% of all Australian women, when purchasing napkins, specify a particular brand. The more you display Kotex, the easier you make it for them to buy, thereby bringing you a greater percentage of large volume, regular sales.

**Feature the new Double Pack:** Women are taking to the new Kotex Double Pack (24 napkins). It's handy for them and it's good for you, too. One sale and you've sold the second dozen that might have gone elsewhere.

**Positive identification, less conspicuous for wrapping:** The new detachable band shows clearly that your customers are buying Kotex, but it can be removed before they receive the by-then-anonymous packet.

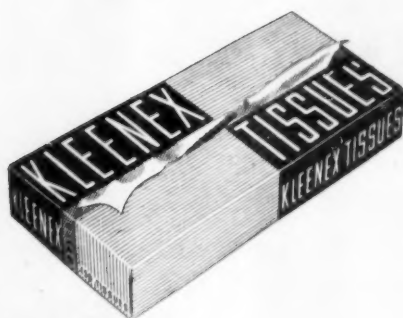
**The biggest advertising boost on record:** We've stepped up last year's record advertising expenditure by 26.2% for 1955. Big, newsy ads. in leading women's magazines and city newspapers are pre-selling your customers on the new features Kotex is offering. Get the most benefit from our advertising this year by keeping Kotex Napkins and Belts well displayed.

**Quantity concessions and continued attractive profit margins:** Price concessions (and resulting higher mark-ups) are offered on quantity orders of Kotex; may also be obtained by combined orders of Kotex and Kleenex.

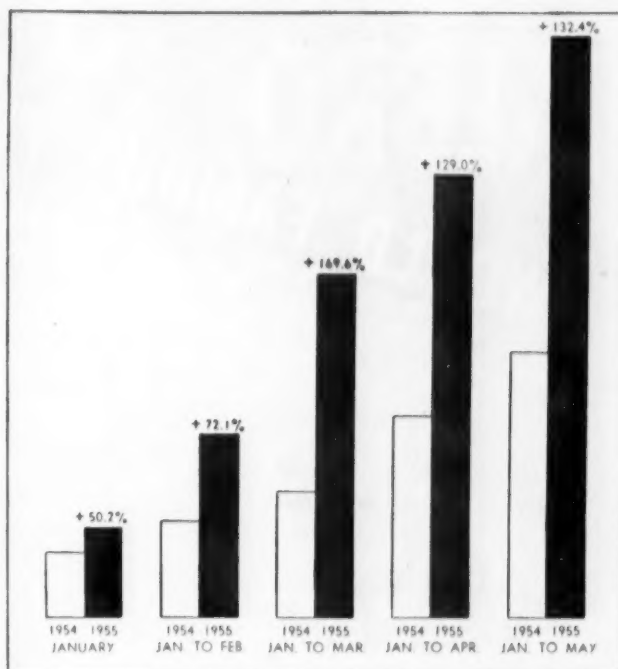


### Display Kotex for profitable impulse sales

Customers should be put at ease when buying sanitary napkins and belts. Easy-to-see and convenient help-yourself displays bring profitable new business.



**Sales are  
more than double  
last year's!**



*Kleenex sales through chemists for the first five months of 1955 compared with corresponding months of 1954.*

## Are sales up in your store?

As we promised, sales of Kleenex are snowballing faster than ever before. People who originally only bought Kleenex when they had a heavy cold now are keeping a packet in the house all the time, are using it for all sorts of uses as

well as for handkerchiefs. Pre-sold by our record advertising expenditure (up 27.7% on 1954) in magazines, newspapers and radio, thousands of new customers are trying Kleenex — all of them prospects for this increased-use promotion.

**Get in for your share!** Take a look at the Kleenex sales chart above. Sales this year are more than double the previous record sales. Don't let the other fellow make the sales you may be missing as well as his own share. Hop aboard the bandwagon of this big volume, high profit line.

**Display Kleenex to sell more of it.** The more you display Kleenex where your customers can see it, the more you sell. In stores where Kleenex is well displayed it soon becomes one of the fastest selling lines.

**Stock all FOUR sizes.** Now that there are four Kleenex packet sizes to choose from, customers are getting to have their own favourites—they not only want Kleenex, they want it in a particular size. Don't half-satisfy them—keep all four sizes in stock (9d., 1/6, 2/-, 3/9).



Kleenex is made by: **AUSTRALIAN CELLUCOTTON PRODUCTS PTY. LTD.**  
Box 42, P.O., Lane Cove, N.S.W.

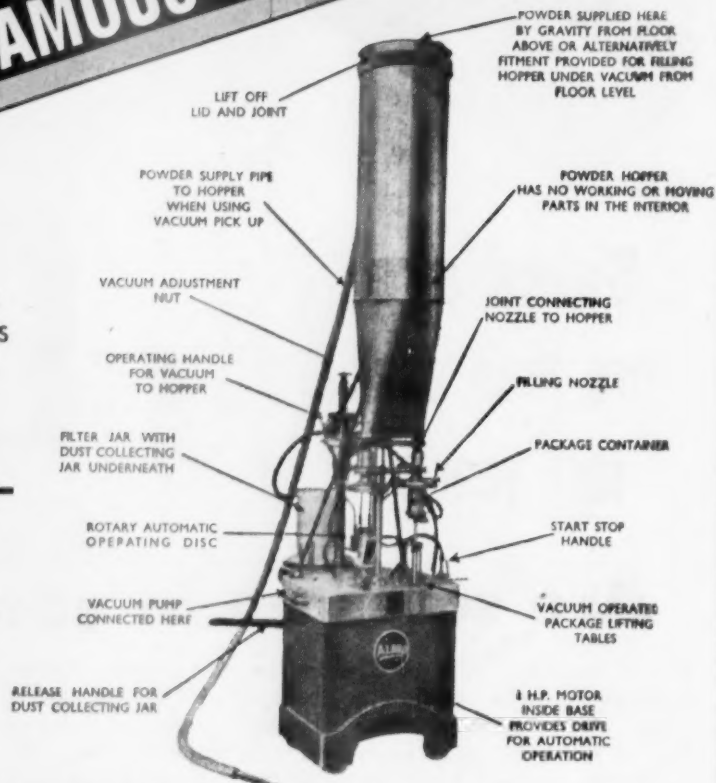
# ALBRO

## WORLD FAMOUS FILLERS

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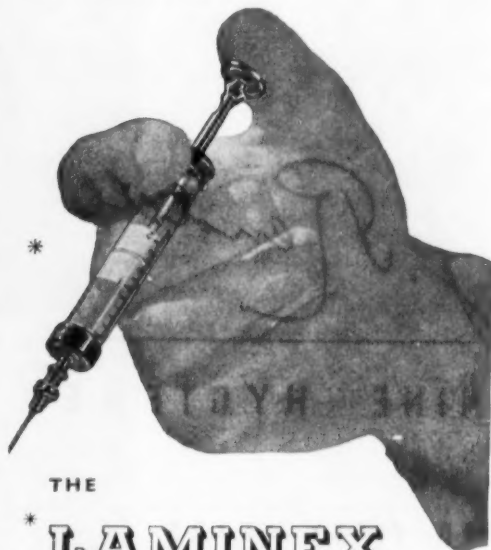
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*The swing to BATH SIZE goes on and on!*

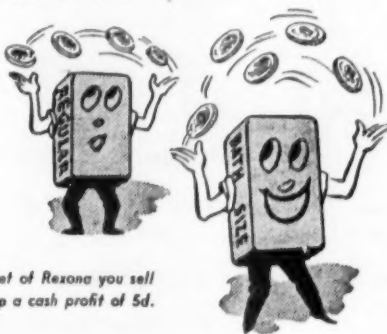
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	CONTROL	EXPERIMENTAL
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	After dilution	2+
$\frac{S}{2}$	Before dilution	3
	After dilution	3
$\frac{S}{4}$	Before dilution	3
	After dilution	2+
$\frac{S}{8}$	Before dilution	3
	After dilution	3
$\frac{S}{16}$	Before dilution	3
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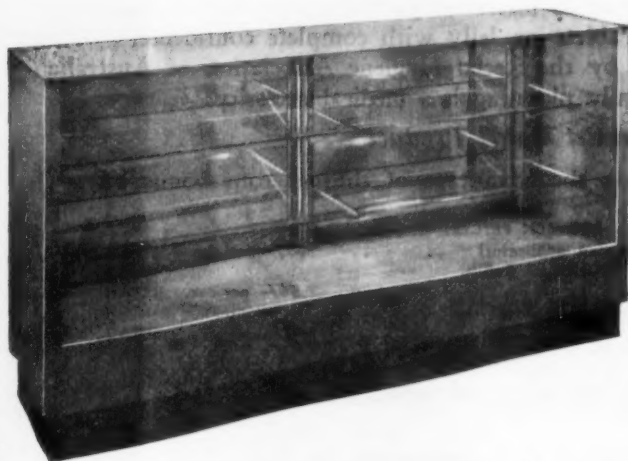


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